



**CARE – Norad**

**Multi-year plan**

2009 – 2013

**29<sup>th</sup> May 2009<sup>1</sup>**

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<sup>1</sup> This is a rewritten version of CARE's multi-year application to Norad, 25<sup>th</sup> September 2008

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## List of Acronyms

AADI - Association for the Support to Integrated Development  
ABUBEF - Association Burundaise pour le Bien-Etre Familial  
ACERT - Care Emergency Response Team  
AID Mali - Malian Association of Development Initiatives and Actions  
AMAPROS - Malian Association for the Promotion of the Sahel  
AMDA - Association of Medical Doctors of Asia  
ANSS – French acronym for the National NGO for Support to people living with Aids in Burundi  
APDH – Association Pour La Paix et les Droit de l'Homme  
APEJ - Agency for the Promotion of Employment  
ARBEF - Association Rwandaise pour le Bien-Etre Familial  
ARC - American Refugee Council  
ARDIL - Action Research for the Development of Local Initiatives  
ARLPI - Acholi Religious Leaders Peace Initiative  
ASCAS - Accumulating Savings and Credit Associations  
ASSAFE - Association for Assistance to Women and Youth  
AZG – Artsen Zonder Grenzen / Médecins Sans Frontières (Holland)  
BCC - Behaviour, Change, Communication  
CAID - Unit of Support to Development Initiatives  
(V)CBOs – Village/Community Based Organisations  
CCA ONG - NGOs Coordination Committee  
CEDAW – Convention on the Elimination of all forms of Discrimination Against Women  
CI – Care International  
CNF – Conseil National des Femmes  
CO – Country Office  
CPF - Charity for Peace Foundation  
CRPs – Community Resources Persons  
CRS – Catholic Relief Services  
CSOs – Civil Society Organisations  
CSOPNU - Civil Society Organization for Peace in Northern Uganda  
CY – Calendar Year  
DCG – Drylands Coordination Group  
DDMC – District Disaster Management Committees  
DEGE - Development Education for Girls Empowerment  
DELIRA - Development and Life Relief Association  
DFID – UK’s Department for International Development  
DHS – Demography and Health Survey  
DNU - Diocese of Northern Uganda  
DOK - Diocese of Kitgum  
DRC – Democratic Republic of Congo  
DRPS - Development and Poverty Reduction Strategy  
GcoAZ - Group of Coordination of the Arid Regions  
FAO – Food and Agriculture Organization  
FNL - Forces Nationales de Libération  
FOKAPAWA - Forum for Kalongo Parish Women Association  
FONGEM - Forum of European NGOs in Mali  
(S)GBV – (Sexual and) Gender Based Violence  
GDFA - Gulu District Farmers Association  
GDP – Gross Domestic Product  
GENOVICO - Nonviolent Conflicts Management  
GLAG – Great Lakes Advocacy Group,  
GoU - Government of Uganda  
GoUM - Government of the Union of Burma  
GPRSP/CSCRIP - Malian Government’s Growth and Poverty Reduction Strategic Paper

GSL – Group Saving and Loan  
HDI – Human Development Index  
IASC - Inter Agency Standing Committee  
ICDP - International Conference on Population and Development  
IDOS - Institutional Strengthening and Organizational Development  
IDPs – Internally Displaced People  
IEC – Information, education and communication  
IFAD – International Fund for Agriculture Development  
IGAs – Income Generating Activities  
INGOs – International Non-Governmental Organizations  
IPPF - International Federation of Family Planning  
ITEKA - Ligue Burundaise des Droits de l'Homme  
IRC - International Rescue Committee  
KDPA - Kigoma Development Promotion Agency  
KES – Kenyan Shilling  
KIWEPI - Kitgum Women Peace Initiative  
LDCs – Least Developed Countries  
LIGs - Livestock Income Groups  
LRA - Lords Resistance Army  
LRSP – Long Range Strategic Plan  
MAAIF - Ministry of Agriculture and Forestry  
MANA – Burma Anti-Narcotics Association  
MCC - Mennonite Central Committee  
MDGs – Millennium Development Goals  
MDLSP - Magu District Livelihood Security Project  
M&E – Monitoring and Evaluation  
MFIs – Micro Finance Institutions  
MFPED - Ministry of Finance and Economic Planning  
MIFOSE - Misungwi Food Security Project  
MJT – Domestic name for savings- and loan groups (Mali)  
MKUKUTA – Tanzania National Strategy for Growth and Reduction of Poverty  
MMD – Domestic name of the savings- and loan groups (Niger)  
MOU – Memorandum of Understanding  
MTEF - Medium Term Expenditure Framework  
MTR – Mid-term Review  
NAADS - National Agricultural Advisory Development Services  
NGENARECO - Ngezi Vumawimbi Natural Resources Conservation Organization  
NGSRP/ MKUKUTA- Tanzania’s National Strategy for Growth and Reduction of Poverty  
NUSAF - Northern Uganda Social Action Fund  
ODM – Orange Democratic Movement  
OOD - Opportunities and Obstacle for Development  
ONGs – French acronym for NGO  
PDR - Provisional Development Rehabilitation  
PEAP - Poverty Eradication Action Plan  
PET – Participatory Education Theatre  
PGC - Programme Governance Committee  
PMA - Programme for Modernization Agriculture  
POWER – Promoting opportunities for women’s empowerment in Rwanda  
PRDP – Peace Recovery and Development Plan (2006-2009)  
PRSP – Poverty Reduction Strategy Paper  
RDS - Rural Development Strategy  
ROSCAS - Rotative Savings and Credit Associations  
SAPI - Food Security Project through the Promotion of Irrigation  
SDC – Swiss Agency for Development and Cooperation  
SII – Strategic Impact Inquiry

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SNV – name of Netherland’s Development Organisation  
SLG – Saving and Loan Group  
SRHR – Sexual and Reproductive Health and Rights  
TGNP - Tanzania Gender Networking Programme  
TOR – Term Of Reference  
ToTs- Training of Trainers  
UNDP – United Nations Development Programme  
UNHCR - United Nations High Commissioner for Refugees  
UNICEF – United Nations Children's Fund  
UNIFEM – United Nations Development Fund for Women  
UNFPA – United Nations Population Fund  
UNODC \_ United Nations Office on Drugs and Crime  
UNSCR 1325 – United Nations Security Council’s Resolution 1325  
USAID – United States Agency for International Development  
VA – Village Agents  
VCCs - Villages Conservation Committees  
VCT – Voluntary Counselling and Testing  
VDCs – Village Development Committees  
VSL– Voluntary Savings and Loan groups  
WAGE – Women and Girls Empowerment  
WFP \_ World Food Programme  
WHGs – Women’s Health Groups  
WHO – World Health Organization  
WORUDET - Women and Rural Development Networks  
WSGs – Women Support Groups  
YAGTU – Yam Giribolo Tumo, national NGO in Mali

## PART 1: INFORMATION ON THE ORGANISATION AND ITS STRATEGY

### 1.1. BASIC INFORMATION ON THE GRANT RECIPIENT

#### A) *Grant recipient*

Name and abbreviation	Norwegian: CARE Norge English: CARE Norway
Postal address/street address:	Universitetsgt. 12, 0164 Oslo
Telephone no:	+47 22 99 26 00
Telefax no:	+47 22 99 26 01
E-mail:	<a href="mailto:care.norge@care.no">care.norge@care.no</a>
Web:	<a href="http://www.care.no">www.care.no</a>
Contact person:	Jan Olav Baarøy (Programme Director)
Telephone no:	+47 22 99 26 05
E-mail:	<a href="mailto:jan.baaroy@care.no">jan.baaroy@care.no</a>

#### B) *Background information on the Grant Recipient*

CARE was established in 1945 by 22 NGOs from Canada and USA to help Europe after the Second World War. In the early 60s CARE began working in both Asia and Africa, and the organization expanded to include other members from Europe. CARE International was founded in 1982, and is today a global confederation of 12 national member organizations working together to end poverty. The global secretariat and emergency unit is located in Geneva.

CARE is a leading humanitarian organization fighting global poverty. Non-political and non-sectarian, we operate in more than 65 countries in Africa, Asia, Latin America, the Middle East and Eastern Europe, reaching more than 50 million people in poor communities.

**CARE International's vision:** We seek a world of hope, tolerance and social justice, where poverty has been overcome and people live in dignity and security. CARE International will be a global force and a partner of choice within a world-wide movement dedicated to ending poverty. We will be known everywhere for our unshaken commitment to the dignity of people.

Addressing the underlying causes of poverty is at the core of all our development work. CARE is also often one of the first organizations to deliver emergency aid to survivors of natural disasters and war and, once the immediate crisis is over, we help people to rebuild their lives. CARE is a large international organisation with more than 14 500 employees worldwide, so we have a strong local presence. More than 90 % of our staff are nationals of the countries where our programmes are run.

CARE Norway was established in 1980, by leading persons in Husmorforbundet, Kiwanis, Samvirke and others. CARE Norway focuses on the role of women in development processes. According to our by-laws, CARE Norway stresses “having a gender perspective on all our work; are determined to ensure that all our programmes contribute to increased food security and sustainable management of natural resources. Our programme builds on local communities’ own traditions, resources and needs”.

#### C) *Activities of the Grant Recipient*

- Awareness raising of and information to the Norwegian public through media, magazines, newspapers, campaigns, seminars etc, in order to engage the community,
- Advocacy work towards decision makers, donors and politicians,
- Fundraising activities to mobilize resources from private donors

***D) Number of employees***

CARE Norway has 16 employees.

Number of employees and man-years working with development cooperation: 6

***E) Number of members***

CARE Norway has 3582 members.

***F) International networks***

CARE Norway is a member of CARE International.

***G) Type of legal entity***

CARE Norway is an association.

***H) Decision making***

There are several levels of decision making in the development of a new CARE programme of cooperation. Local stakeholders and programme participants (particularly women) participate in discussions with CARE country offices' local partners about challenges and issues at stake in the communities. The local partner proposal based on the discussion with beneficiaries is included in the decisions making process.

The respective CARE country office identifies geographic and thematic areas of work in dialogue with local and national governments according to their respective plans for development and poverty reduction<sup>2</sup>. CARE Norway is either approached by the country office, or does actively approach a country office according to its thematic interest to support a development activity in the concerned country. At this point CARE Norway and the CARE country office embark on the detailed development of a programme document. Based on this programme document the decision-making process is set and regulated according to the contract securing CARE Norway/donors regulations.

In CARE Norway programme coordinators and programme advisors facilitate the day-to-day contact with the country offices and ensure that focus on women and gender, mutual partnership, strengthening of civil society and other fundamental areas agreed are included in the new programme documents, and in the future follow up during implementation, monitoring and evaluation of the progress and impact.

CARE Norway also seeks to influence both Norwegian and international policymakers to give more attention to the needs and aspirations of poor and vulnerable people. Advocacy based on experiences from the field is an important part of CARE Norway's work.

CARE Norway's programme director is responsible for the programme and ensures that synergy is made with other CARE International members and their support to common country offices. He is responsible to the National Director. The National Director is a member of the CARE International National Directors Committee that makes recommendations on a strategic level for CARE's work all over the world. As CARE Norway is focusing on women's empowerment and gender equality, the National Director is instrumental in ensuring that these issues always are high on the agenda of CARE International. This has proven to be successful and women's empowerment is becoming increasingly important for CARE as a whole. The National Director is responsible to the CARE Norway board which approves the annual plans, budgets and strategies.

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<sup>2</sup> For aspects influencing selection of focus countries, see 1.2I.

1.2. DEVELOPMENT COOPERATION STRATEGY AND EXPERTISE

*A) The Grant Recipient's values, general goal and development cooperation strategy*

**CARE International's mission:** to serve individuals and families in the poorest communities in the world. Drawing strength from our global diversity, resources and experience, we promote innovative solutions and are advocates for global responsibility. We facilitate lasting change by:

- Strengthening capacity for self-help
- Providing economic opportunity
- Delivering relief in emergencies
- Influencing policy decisions at all levels
- Addressing discrimination in all its forms

Guided by the aspirations of local communities, we pursue our mission with both excellence and compassion because the people whom we serve deserve nothing less.

To fulfil CARE's vision and mission, all our programmes should conform to the Programming Principles, contained within the CI Code. These Principles are characteristics that should inform and guide, at a fundamental level, the way we work.

**Principle 1: Promote a more equitable distribution of power.** We stand in solidarity with poor and marginalized people, and support their empowerment, taking control of their own lives to fulfil their rights, responsibilities and aspirations. We address structural power imbalances, promoting a more just distribution of power. We ensure that key participants and organizations representing affected people are partners in the design, implementation, monitoring and evaluation of our programmes.

**Principle 2: Work with partners.** We work with others to maximize the impact of our programmes, building alliances and partnerships with those who offer complementary approaches, are able to adopt effective programming approaches on a larger scale, and/or who have responsibility to fulfil rights and reduce poverty through policy change and enforcement.

**Principle 3: Ensure Accountability and Promote Responsibility.** We seek ways to be held accountable to poor and marginalized people whose rights are denied. We identify individuals and institutions with an obligation toward poor and marginalized people, and support and encourage their efforts to fulfil their responsibilities and accountabilities.

**Principle 4: Address Discrimination.** In our programmes and offices we address discrimination and the denial of rights based on sex, race, nationality, ethnicity, class, religion, age, physical ability, caste, opinion or sexual orientation.

**Principle 5: Promote the non-violent resolution of conflicts.** We promote just and non-violent means for preventing and resolving conflicts at all levels, noting that such conflicts contribute to poverty and the denial of rights. We ensure that our programmes do not, in any way, contribute to violent conflicts but work in order to promote peace.

**Principle 6: Attain Sustainable Impact.** As we address underlying causes of poverty and rights denial, we develop and use approaches that ensure our programmes result in lasting and fundamental impacts in the lives of the poor and marginalized with whom we work.

**GOAL:** CARE Norway's goal for 2009-2013 is to contribute to CARE's vision through a particular focus on women's empowerment and gender equality. We focus on women in our work because 70% of the world's poor people are women and because women's rights are often violated. Our goal for this period is that:

- CARE shall support women's struggle against poverty and promote women's rights through high quality programming and competence, and good cooperation with our partners;
- CARE will in 2013 be Norway's leading organisation within women's empowerment and gender equality in development cooperation.
- CARE will have a strong and independent voice both in the public debate and within CARE International<sup>3</sup>.

**WORKING METHODS:** CARE Norway is engaged in long-term development cooperation; humanitarian aid; and advocacy.

**Long-term development cooperation:** CARE Norway's long-term development cooperation is anchored in local resources and aims to empower women and assist them in creating a better life for themselves and their families. All programmes are developed in collaboration with women who themselves identify their priorities, and suggest what type of development cooperation they need and the nature of joint projects with CARE. CARE contributes with a high level of development aid competence, experience and a wide global network. We put a lot of emphasis into developing equal and mutual partnerships. The goal is always to together create sustainable development cooperation programmes, where local partners will take over the responsibility and will continue the work long after CARE has left.

**Humanitarian aid:** CARE International is the world's third largest development organisation present in more than 65 countries world wide. Therefore, with its already established partnerships and knowledge of diverse culture, language and politics, CARE is well placed to deliver humanitarian aid effectively. CARE Norway will make a particular contribution to ensure that protection of women and their particular rights are respected in all humanitarian aid supported by Norway through CARE. We also work towards ensuring that all humanitarian aid must have a longer term perspective and be interlinked with long term development initiatives with the objective to ensure sustainability and to reduce vulnerability among women.

**Advocacy:** Internationally and in Norway CARE wants to be a spokesperson for a global human rights approach in all development aid assistance and focus on the underlying causes for social injustice and poverty while stressing a gender perspective. As a member of CARE International, we receive information, analysis and recommendations from colleagues around the world. CARE uses this actively to engage in the Norwegian debate on development aid. Experiences from our country offices are core in our political advocacy work.

Where ever present, CARE is a key player among the development organizations. This gives us the opportunity to design large development aid programmes in cooperation with others. This also gives us a significant platform for evidence based advocacy and lobbying at local, national and international levels.

**THEMATIC FOCUS AREAS:** CARE Norway had identified four thematic focus areas for our programmes and advocacy work for the next five years:

**Women's Economic Empowerment:** Strengthening the economic security of women and reducing their vulnerability to shocks, e.g. food crisis and climate change.

**Governance and Women Participation:** Enhancing women's role, and real say, in decision making at all levels (household, local, national and international).

**Sexual and reproductive health and rights:** Ensuring women's right to control fertility and own body.

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<sup>3</sup> CARE Norway's Strategy for 2009-2013

**Gender based violence:** Elimination and support to survivors of all types of gender based violence be it for instance domestic violence, sexual violence in conflict and war or human trafficking.

Further description of these thematic focus areas is found in part 2 under the presentation of the different programme plans.

### ***B) The Grant recipient's experience and resources***

Norad's Organisational Review of CARE Norway of July 2007 states that "*The overall conclusion of this review is that CARE Norway is a highly competent organisation with good management and staff capacity and professional and effective strategies and systems*"<sup>4</sup>. CARE has not only maintained its highly competent staff, but has grown since the review took place. Our organisation encompasses today technical expertise with Master degrees and beyond from the Norwegian University of Life Science, University of Oslo, London School of Economics and others, in the areas of environment and development studies, human rights, social anthropology, religion, political science, economy and journalism.

Long time work experience has provided staff with experiences from the UN system; Norwegian Ministries (incl. MOFA and Norad), various international and local civil society organisations in Norway and the field, research institutions, as well as from the private sector and business. Our wide reaching area of expertise includes long term and cutting edge technical skills in microfinance, gender, sexual and reproductive health and rights, advocacy and results based management. Other areas of experience include international human rights, civil society in Africa, democratization and decentralisation processes, food-security and emergency preparedness planning. CARE Norway has staff with experience from work at the international headquarter level, programme management at country office level and also long term fieldwork in rural villages.

CARE Norway's board consists of persons within the private sector engaged in marketing, international trade, from public administration, and academic research on areas at the core of CARE Norway's strategy.

In order to further develop CARE Norway's added value among development aid partners, media and the public opinion in Norway, and to increase our technical support on the thematic areas to CARE country offices, we are planning to increase the number of staff working on technical support.

As a member of CARE International, we are constantly utilising the technical capacity and competence of our fellow CARE members. This is being organised around so-called "Centres of Expertise", where for instance CARE Denmark takes the lead on Climate Change within the confederation, and CARE Netherlands on Disaster Risk Reduction. CARE Norway has also been approached about taking on a similar role on Gender. A final decision on this is still pending.

### ***C) Quality assurance***

The members of CARE International share systems for assuring programme quality in design, implementation, monitoring and evaluation<sup>5</sup>. CARE is in the process of going through a shift from a project to programme approach and has recently adapted the programme standards, principles and programme quality characteristics that reflect this change to ensure quality of programmes and lasting impact on poverty and social injustice.

*CARE's definition of a Programme: A coherent set of initiatives by CARE and our allies that involves a long term commitment to specific marginalized and vulnerable groups to achieve lasting impact on a broader scale on underlying causes of poverty and social injustice. This*

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<sup>4</sup> Norad. CARE Norway Organisational Review, page 5, July 2007.

<sup>5</sup> See CARE's Programme Quality Digital Library here: <http://pqdl.care.org/default.aspx>

*goes beyond the scope of projects to achieve positive changes in human conditions, in social positions and in creating enabling environment.*

Programme documents are developed jointly by the country office, partners, often government representatives, members of the target population and the CARE International member based on an analysis of underlying causes of poverty and injustice and a combination of strategic directions in the country offices' long range strategic plan, CARE Norway's priorities (that usually are in line with priorities in the country offices' strategic plan since CARE Norway participates in the design of the country offices' strategic plan, or at least provides input), and the country's own priorities.

To assess the quality of the design and implementation of programmes, a set of 12 indicators have been identified. These indicators focus on measuring the degree to which we are implementing the CARE International **programming principles** (see 1.2. A) and other key strategies prioritized at CARE. These indicators are:

**Promote Empowerment:**

1. # and % of programme initiatives that have deliberate strategies to shift power relations and to empower specific marginalized and excluded groups, in particular women. (CARE Norway alongside representatives of its country offices has developed 6 Programme Quality Indicators for Gender Equality which is presented under 1.2.N)

**Work with Partners:**

2. # of strategic partnerships (non-project; non-contract specific) in place.

**Ensure Accountability and Promote Responsibility:**

3. # and % programme initiatives that have a functioning system in place to be held accountable by participants and civil society.

4. # and % programme initiatives that have a deliberate strategy for compelling those with responsibilities toward poor and marginalized people to fulfil their obligations.

**Address Discrimination**

5. # and % of programme initiatives that have a deliberate strategy for opposing discrimination and promoting equity, in particular gender equity.

**Promote Non-Violent Conflict Resolution**

6. # and % of programme initiatives that have a deliberate strategy to address potential or existing conflicts arising from shifts in power relations.

**Seek Sustainable Results**

7. # and % of programme initiatives that have a coherent strategy to address and measure impact on the underlying causes of poverty and social injustice.

**Advocacy**

8. # and % of programme initiatives that include a deliberate strategy for advocacy.

**Learning and Knowledge Management**

9. # and % of programme initiatives that have a deliberate strategy to identify/share lessons learned and make improvements in a timely manner (organizational learning).

10. # and % of programme initiatives that have a deliberate strategy to promote knowledge sharing within and between groups in society (social learning).

**Technical and project management standards**

11. # and % of programme initiatives that apply relevant technical and project management standards adopted by CARE

## Emergency Readiness

### 12. Level of risk versus level of preparedness

CARE International embarked in 2008 on a new organisational performance and learning system named 'Ubora', Kiswahili word for "excellence"<sup>6</sup>. Ubora will provide a common framework for the ongoing measurement of performance across country offices. One crucial part of Ubora is establishing programme impact measurement systems that will provide summary information on the contributions CARE, working with others, is making toward eradicating poverty and achieving social justice. Key elements of an impact measurement system would include.

- Measurement across long periods of time rather than over project life cycles
- Measurement beyond the output and outcome level to the impact level
- Measurement across both project and non-project activities (programme initiatives)
- Measurement of cross-cutting themes, as well as the main programme focus (i.e. governance, as well as health)
- Measurement of outcomes and impacts across a minimum set of internally consistent and externally comparable indicators
- Measurement of CARE's attribution and contribution to outcomes and impacts
- Measurement that allows for the testing of social change hypotheses rather than just verifying outcomes

Applications to Norad are developed at CARE Norway offices based on programme documents and plans that have been developed by the programme following these principles and guidelines. In addition CARE Norway refers to Programme Quality Indicators for Gender Equality that are presented in 1.2. n)

#### *D) Monitoring local offices in partner countries*

In general the country offices have specialised monitoring units serving the country programme and/or monitoring officers within the individual programme, depending on the size and complexity of the programme. They are also supported by the country offices' senior programme management, and by the Programme Information, Knowledge and Learning experts within CARE International. As mentioned, the shift from project to programme approach is going on in CARE and CARE is investing a lot of resources in developing appropriate tools for monitoring and evaluation both of programme quality, performance and impact and also that of programme support. Extensive consultation among CI members and COs is taking place and within each region one country offices is designated a learning lab and will be followed up closely as they proceed with the change. For West-Africa, Mali is the learning lab.

Most often a baseline is undertaken at the start of a programme, and indicators are identified, usually in collaboration with partners and members from the target group (and sometimes donors). Annual operating plans are made for each programme and for the country offices as a whole, and these are being reviewed quarterly.

Regular monitoring is done by programme staff, and reported up to programme management for daily management decisions, and periodic reporting (often monthly) to country offices management, and less frequent intervals to CARE International member and donors. Usually programmes will conduct annual reviews and planning workshops with partners and participants to assess progress in relation to plans and discuss any issues related to progress.

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<sup>6</sup> <http://p-shift.care2share.wikispaces.net/space/showimage/Ubora+Overview.pdf>.

CARE Norway receives semester- and annual reports from country offices and discusses progress based on these. CARE Norway and country offices also discuss strategic issues in relation to the general development in the country, and to national priorities and directions and CARE Norway's thematic areas.

The country offices usually initiate preparations for the midterm and final evaluations, in line with contracts, but discuss terms of references with CARE International member. Traditionally mid-term evaluations and final evaluations are usually conducted by an external evaluator, and these are sometimes preceded by internal evaluations. The shift to programme approach is an ongoing process and guidelines for programme cycle management are being developed. However, it is clear that CARE will seek to undertake more ex post evaluations in future to determine long term effects of programmes, something that has rarely been done before.

Many CARE country offices have an internal auditor, but depending on donor requirements, local external audits are undertaken in line with grant management guidelines. Country offices' have systems for financial monitoring, but the reporting lines are under revision, and will be under the responsibility of a regional financial controller based in the regional CARE office.

CARE Norway also initiates annual audits of all CARE Norway funded programmes and discuss matters of financial monitoring and control with the country offices.

#### ***E) Monitoring and evaluation of results***

CARE believes that in order to achieve significant and lasting impact on poverty and social injustice, especially on women and girls, all of our programmes should include the following **characteristics**:

1. A clearly defined **goal** for impact on the lives of a specific group, realized at broad scale.
  - The programme must define what “**broad scale**” means, but, in general, we mean at least at national scale or for a whole marginalized population group.
  - Impact should occur across three areas of unifying framework (human conditions, social position, enabling environment).
  - Impact should be seen and evaluated over an extended period of time.
2. A thorough analysis of underlying causes of poverty, gender inequality and social injustice at multiple levels with multiple stakeholders.
  - “**Multiple levels**” means community through global.
  - Analysis includes scenarios based on potential risk (including disaster risks).
  - Analysis identifies and prioritizes the causes that **MUST** be addressed in order to achieve the goal.
  - This analysis is updated regularly to incorporate changes in context.
3. An explicit **theory of change** that is rigorously tested and adapted to reflect ongoing learning.
  - A theory of change outlines the key assumptions and hypotheses that underpin the programme design.
  - The theory should be robust enough to be applicable in various scenarios of risk.
4. A **coherent set of initiatives** that enable CARE and our allies to contribute significantly to the transformation articulated in the theory of change.
  - At a minimum these initiatives will challenge power relations, achieve systemic changes in institutions, work at multiple levels, contribute to policy change.
5. Ability to promote **organizational and social learning**, to generate **knowledge and evidence** of impact.
  - Evidence and knowledge will be used for advocacy, risk analysis and mitigation, adapting the theory of change and leveraging resources.
6. Contribution to **broad movements for social change** through our work with and strengthening of partners, networks and alliances.
  - This means clearly understanding and strengthening our organizational credibility, legitimacy, identity and positioning.

7. A strategy to leverage and influence the use and allocation of **financial and other resources** within society for maximizing change at a broader scale.
  - This requires protecting and developing our knowledge and talent base, demonstrating impact and cost-effectiveness of strategies, and building new types of donor relationships.
8. **Accountability systems** to internal and external stakeholders that is transparent.
  - To the marginalized groups whose rights we seek to see fulfilled.
  - To allies and partners, including donors and governments.
  - All staff are accountable for their contribution to the programme.
  - Stakeholders have the information they need.

These characteristics have recently been defined in connection with the ongoing shift from project to programme approach. CARE Norway in principle adheres to the same systems for monitoring and evaluation as CARE International, and is referring to the CARE International Evaluation Policy<sup>7</sup> that was developed a couple of years ago. In line with the new programme approach, CARE is also developing a new approach to measuring impact<sup>8</sup>, in which CARE Norway will ensure that women's lives and experiences are at the core in that focus.

CARE Norway's own strategic and thematic priorities in terms of focusing on Women - and economic empowerment; participation; sexual and reproductive health; gender based violence have been developed in collaboration with the main collaborating COs and partners. In April 2009, the country offices supported by this multi-year plan agreed on 10 common indicators for monitoring and measuring of the outcomes of the programmes, see annex 2.

Otherwise, CARE Norway's monitoring and evaluation practice consists of giving feedback on assessments and studies, TORs and evaluation reports, and provide information to our institutional and private donors based on reports from the field. At least one planning and technical support visit is usually undertaken each year and programme seminars and workshop with CO programme coordinators take place biannually.

With the thematic programmes and the new programme agreement, CARE Norway will seek to develop a more systematic mechanism for monitoring and evaluating results of CARE Norway's own efforts or value added. CARE Norway will also undertake a process reflexion on further implications the shift from project to programme approach should have on the work at our level in the organisation.

#### ***F) The Grant Recipient's added value towards partners***

As outlined above in CARE's Programme Characteristics, close collaboration with and strengthening of partners, networks and alliances is central to our programming approach. It is moreover a prerequisite for achieving the social change that we aim for.

In March, 2008 CARE Norway organised a workshop for all concerned CARE country offices in preparation for this application. Our common partnership approach was one of the key issues discussed. One of the main observations during the workshop was that ideal and meaningful partnerships, which involve a high degree of mutuality, cannot be established immediately as such, but that these types of relationships need investments and will have to be developed over time. Accordingly, the following "indicators" for ideal partnerships were developed:

- Common objective, vision and purpose
- Clear roles and responsibilities at all levels
- Power analyses undertaken

<sup>7</sup> [http://pqdl.care.org/core/Shared%20Documents/CARE%20International%20Evaluation%20Policy%20\(English\).pdf](http://pqdl.care.org/core/Shared%20Documents/CARE%20International%20Evaluation%20Policy%20(English).pdf)

<sup>8</sup> [http://p-shift.care2share.wikispaces.net/space/showimage/Brief%20No.4\\_Measuring%20Programme%20Impact.pdf](http://p-shift.care2share.wikispaces.net/space/showimage/Brief%20No.4_Measuring%20Programme%20Impact.pdf)

- Mutual respect, trust and transparency
- Long term partnerships
- Ensure proper, programme-specific analysis of purpose of partnerships
- Regular reviews of partnership throughout implementation

Some proposed strategies for achieving such partnerships include:

- Acknowledging weaknesses and strengths
- Sharing not only vision, but also risks and responsibilities
- Working towards ensuring mutual accountability
- Involving partners in the entire programme cycle (from planning to evaluation)
- Facilitating joint resource contributions
- Conducting power analyses
- Undertaking partnership reviews
- Ensuring common planning and budgeting for institutional support and capacity building

Finally, workshop participants came up with the following partnership matrix to facilitate the analysis of and planning for the various partnerships and working relationship within the specific programmes (this has been used in the development of several of the programmes included in this application).

Type of partner organization	Purpose of partnership/collaboration	CARE's added value to partner & beneficiaries	Partner's added value to CARE & beneficiaries	Nature of partnership/Level of formality	Level of partner's engagement in programme cycle	How partnership relationships are evaluated and its frequency
e.g. Local NGO						
e.g. Village/District Council						
e.g. Faith-based organization						
e.g. Private sector						

In addition to this type of strategic support to and capacity building of partners, the programmes include competence enhancement of partners along the lines of CARE Norway's four thematic focus areas. For further information see point 1.2. I.

### **G) Choosing local partners**

As expressed above CARE has a differentiated approach to partnerships. This means that we in the process of selecting local partners focus on undertaking thorough analyses at national level to ensure that we, as much as possible, relate to and work with the most relevant local organisations and institutions. Norad's organisational review of CARE in 2007 revealed that *"The process of identifying the right partners and of building their capacities in relation to CARE's approaches and to the tasks at hand appeared very thorough and systematic"*<sup>9</sup>. Through these various types of working relationships with different organisations and institutions, CARE intends to:

- Enhance local ownership, impact and sustainability of the programmes implemented,
- Complement and support available local resources and knowledge,

<sup>9</sup> Norad 2008, p.50

- Contribute to strengthening the civil society in the programme area/country (- in order to both support local civil society actors to assist local governments to respond to local needs, as well as to enable them to hold responsible national and local authorities accountable).

Our approach to partnership also implies acknowledging that different types of partners and working relationships require different types of follow-up and support from CARE. Rather than coming up with general sets of procedures; principles; criteria etc., we focus on identifying context-specific strategies fit to real world situations to ensure that partnerships are purposefully integrated into our programmes. We commit to building internal competence among ourselves (as well as of the partners when needed). This is a move from having “donor-like” relationships with a few local NGOs to entering into long term collaboration with various types of organisations, to work hand-in-hand with them, and finally to ensure that we have the capacity to handle the challenges this will bring. Thus, CARE’s “partnerships” do not include local NGOs only, but also local government institutions, social movements, research institutions, informal local groups etc. As the partnership matrix above outlines, “partnerships” may be both formal (in terms of having a contractual) and informal (focusing on coordination and implementation of joint activities). Most partners will take an active role in all phases of the programme cycle, but we do also acknowledge that not all relationships do have to be equally “deep”.

#### ***H) Choosing target groups<sup>10</sup>***

CARE Norway’s main principle for selection of what Norad defines as *target groups* is that we aim to improve the situation of the most vulnerable groups in the countries where we work; hence we define this as our *primary impact group*, which for CARE are vulnerable women. This is because women constitute 70% of the world poor, and are often also worst hit by both manmade and natural disasters. Field experience has shown us that sustainable development will never be possible without engaging women. CARE Norway supports women in their struggle for social, economic - and political empowerment.

As outlined in the elaboration of our Empowerment Framework in 1.2.N, only targeting women’s “agency” is insufficient. Working along the “relation” and structure” dimensions of empowerment, also includes working with men, and in our case, engaging men in the process to empower women. Consequently, men and boys are *primary target groups* for some of our activities, even though women and girls remain the *primary impact group*. In our programmes this also means, in some cases depending on the context, that men are invited to join in the savings and loan groups with the women.

#### ***I) The Grant Recipient’s geographic and thematic priorities***

**Geographic focus:** During the next 5 years (2009-2013) CARE Norway intends to further sharpen its geographic focus. While prioritizing focus countries the following aspects are being taken into consideration:

- Focus is on the least developed countries (LDCs) of the world
- CARE Norway’s added value both towards the country programmes and the with regards to channelling field based experiences into the development debate in Norway
- Coherence between CARE Norway’s competence, needs in the field and CARE international strategies and plans in the country.
- CARE Norway’s experience and relationship to the respective country offices and partners

The focus countries in this application represent a continuation and strengthening of the main countries that were part of the collaboration agreement with Norad for the years 2006-2007 (with the one-year extension also including 2008). Former programmes in Niger, Mali, Tanzania, Burundi, Rwanda, Uganda and Burma have been redesigned, and to some cases extended in terms of scope to

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<sup>10</sup> In the programme terminology of CARE, this is called the primary impact group.

ensure alignment with CARE International’s programmatic approach (see point 1.2c for more information). The Lok Pachi – *change your attitude* – project in Nyanza, Kenya will phase out by the end of 2009.

The increased geographical focus will be accompanied by a stronger build-up of in-house competence on country context and efforts to ensure strong relations with the respective country offices and programme partners. The above mentioned countries will also be key countries for collaboration beyond the Norad collaboration agreement. Other sources of funding will include for instance grants from the Norwegian Ministry of Foreign Affairs, the NRK telethon of 2009, as well as contributions from regular donors and corporate funding. In line with our programmatic approach these funds will complement the Norad funding of our country programmes (as will other funds raised within the CARE International confederation).

Other core countries for collaboration beyond the Norad agreement will be Sri Lanka, Afghanistan and West Balkan. The selection of these countries is based on a combination of actual needs in the field, CARE International’s mandate and strategies in these countries, as well as the thematic focus of CARE Norway.

**The Savings - and Loan Methodology – a point of entry for women’s empowerment and gender equality:** All programmes, which are part of this application, use locally adapted varieties of the so-called savings and loan groups as a point of departure for achieving women’s empowerment and gender equality. The savings and loan methodology started as a pilot project in Niger funded by the Centre Party’s Women Association through CARE Norway in 1990/91, and from 1992 was funded by Norad. In Niger the methodology is locally known as Mata Masu Dubara, a Hausa expression for “women on the move”, and has proved successful for mobilisation of economic and social capital at the local level. Since then the methodology has been replicated by CARE (and other organisations) throughout Africa and elsewhere in the world. By end of 2006, CARE Norway’s savings and loan groups mobilised 850 000 people (mostly women) across Africa<sup>11</sup>. Therefore, when we, in this application, talk about savings and loan groups it is this methodology we refer to even though these groups have various names.

As outlined in the Final Report to Norad for 2006-2008, the savings and loan methodology has particularly produced results along the following lines:

1) Increased economic security for women

Through increased savings and the possibilities of accessing loan, women are able to start addressing areas of critical need that they were not able to address before, such as affording children’s school books and uniforms; putting a roof on the house or getting transport to the clinic for child birth. Potential for economic growth is enhanced through business development trainings. Women are improving upon existing income generating activities or starting up new ones with skills gained from the programme. The savings and loan groups also provide insurance, which in times of personal shock and emergencies are important for risk reduction and mitigation.

2) Increased social capital among women

Through participation in the savings- and loan groups, and particularly by proving to themselves that they are able to mobilise funds and contribute to the household economy, women gain increased self-esteem, develop a higher degree of mutual trust and solidarity among themselves. This results in joint efforts and support; for example in helping each other cultivate the land in peak seasons; mutual encouragement and support with regards to standing for local elections; support if one of them experience gender based violence (by e.g. negotiating with husband and/or reporting to responsible

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<sup>11</sup> For a recent independent article about the CARE’s model, see: World Resources Report (2008): Women on the Move: Scaling up women's savings groups in Niger, Roots of Resilience, Growing the Wealth of the Poor, pp. 74, box 2.3, online here: <http://www.wri.org/publication/world-resources-2008-roots-of-resilience>

authorities). Moreover, women tend to become more ambitious with regards to engaging in public spheres of society, be it as entrepreneurs or decision makers.

### 3) Strengthened local civil society

The members of the groups benefit from a package of capacity strengthening through training on the roles and responsibilities of their members in the functioning of the organisation, the associative life, healthy management and participation in communal life. The groups thus become veritable learning laboratories of democracy and active citizenship. Moreover, the groups often become local civil society actors of importance and thus a counterbalance to local power-holders. This is particularly important in light of national decentralisation processes i.e. where local, sometimes inexperienced, authorities have gained more responsibilities. Moreover, many places groups form networks, and thus become a stronger force in relation to entering into collaboration with other organisations; being involved in advocacy, as well as becoming clients for larger micro finance institutions. The support to these groups thus supplements other partnerships in the various programmes – and constitutes a support to the informal part of the civil society at local level.

### 4) Formation of conducive environment for bold discussions

The savings- and loan groups also constitute platforms where women and men are engaged in bold discussions around gender roles and gender equality and on issues defined as critical for women themselves; e.g. family planning; reproductive health; gender based violence etc. The mutual trust developed through the savings and loan activities makes it possible to bring up issues of higher sensitivity. Moreover, the groups provide entry points for education, information, and awareness raising around issues of concern.

### 4) Ensuring sustainability

An important feature of the savings and loan methodology is that no external money is lent out. It is entirely based on money saved by the members of the group. This prevents that any one become indebted to external creditors, and ensures ownership, responsibility and sustainability. The sustainability aspect of the methodology has been confirmed in various studies and assessments conducted. For instance Norad's own study report 8/2008: "You cannot save alone" affirms that:

*"in a study on CARE groups at Zanzibar [the researcher] wanted to find out whether the groups were still intact three to four years after CARE stopped the intervention. The surprising finding was that not only were they intact, they had increased by 258%"<sup>12</sup>.*

### **CARE Norway's thematic focus areas:**

As mentioned under point 1.2.b CARE Norway's thematic and technical competence is being organised around four thematic focus areas:

- Women and Economic Empowerment
- Governance and Women's Participation
- Sexual and Reproductive Health
- Gender Based Violence

For more information see thematic programmes under Part 2.

### ***J) Cooperation with other stakeholders***

CARE recognises that in order to promote real and sustainable change in the lives of the intended beneficiaries, programme activities have to be related and aligned with other contributions made by the communities themselves, local and national authorities, as well as other non-governmental actors, UN organizations, etc. Hence, having routines and processes for ensuring active participation and influence of relevant stakeholders in analysis, design, implementation, monitoring and evaluation

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<sup>12</sup> Norad, 2008, p 55

processes is imperative. This is also included in our programme standards, and in CARE (2007): *The Basics of Project Implementation – A guide for Project Managers*<sup>13</sup>.

Following national policy development and planning processes is equally important. Typically CARE takes part in relevant thematic working groups (usually with governmental institutions, as well as other national and international development actors), NGO coordination bodies and moreover NGO networks of a more thematic character. These groups are important for coordination, as well as for exchanging experiences and expertise that can be used in programme implementation. Such relationships are also fundamental for joining voices with “likeminded” institutions that can be used in advocacy and policy related work.

It should also be mentioned that CARE’s work in a country is guided by a national Long Range Strategic Plan (LRSP). This plan usually covers a minimum 5 year period and is developed in consultation with and with input from other relevant actors and stakeholders.

#### ***K) Relevance to recipient countries’ PRSPs***

In general CARE will always, in so far as the country in question has or is developing a PRSP, relate to it in one way or another. CARE has in many cases been actively involved in contributing to the development of certain parts of these strategies, often facilitating the contributions from civil society. The extent to which CARE’s programme is aligned with the priorities of the particular PRSP will vary from country to country, and whether the priorities of the PRSP are concerned with the challenges and interests of marginalised groups in the country. CARE will often refer to gaps in the PRSP, particularly relating to the situation of marginalized groups. More specific information can be found in the individual country chapters in section 2.

#### ***L) Relevance to recipient countries’ priorities***

See country specific response under Part 2.1.

#### ***M) Relevance to Norwegian development cooperation***

Norad’s organisational review of CARE in 2007 states that “*The strategy and work of CARE Norway was found to be well aligned with Norwegian development policies regarding support to civil society organisations and gender. In particular the systematic approach to engaging with local partner organisations was found to be of very high quality*” (Norad, 2008 p. 50).

As mentioned earlier CARE Norway’s focuses our work around women’s empowerment and gender equality, and more specifically on our 4 thematic focus areas: Women’s Economic Empowerment; Governance and Women’s Participation; Sexual and Reproductive Health and Gender Based Violence. Thus, all our activities are relevant to the Ministry of Foreign Affairs’ white paper number 11 “On equal terms: Women’s rights and gender equality in development politics”<sup>14</sup>. All our programmes are also solidly anchored in the “Action Plan for Women’s Rights and Gender Equality in Development Cooperation” (2007-2009). In line with the Norwegian Government’s Action Plan to Combat Human trafficking (2006-2009), CARE supports local organizations working against trafficking of women.

CARE is also committed to contributing to reaching the Millennium Development Goals, particularly MDG number 3 and 5, “promoting gender equality and empower women” and “improving maternal health” by 2015.

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<sup>13</sup> [http://pqdl.care.org/pv\\_obj\\_cache/pv\\_obj\\_id\\_021D5D4FC19831743996E7737C3291E9BB8A5000](http://pqdl.care.org/pv_obj_cache/pv_obj_id_021D5D4FC19831743996E7737C3291E9BB8A5000)

<sup>14</sup> White paper number 11. ”On equal terms. Women’s rights and gender equality in the development politics” (2007-2008).

### *N) Gender perspectives*

Gender inequality is one of the most important underlying causes of poverty and social injustice in all countries where our programmes are being implemented. Enhancing gender equality and women's empowerment is therefore paramount in all our programmes. Our aim is to make sure all our programming is rights based and defined with a clear strategic emphasis on gender equality and women's rights.

CARE Norway recognizes that women have less access to resources, participate less in politics and make up the majority of the world's poor. Furthermore, women are key in the global fight against poverty. The argument for empowerment of women is both efficiency - and rights based. More specifically CARE is:

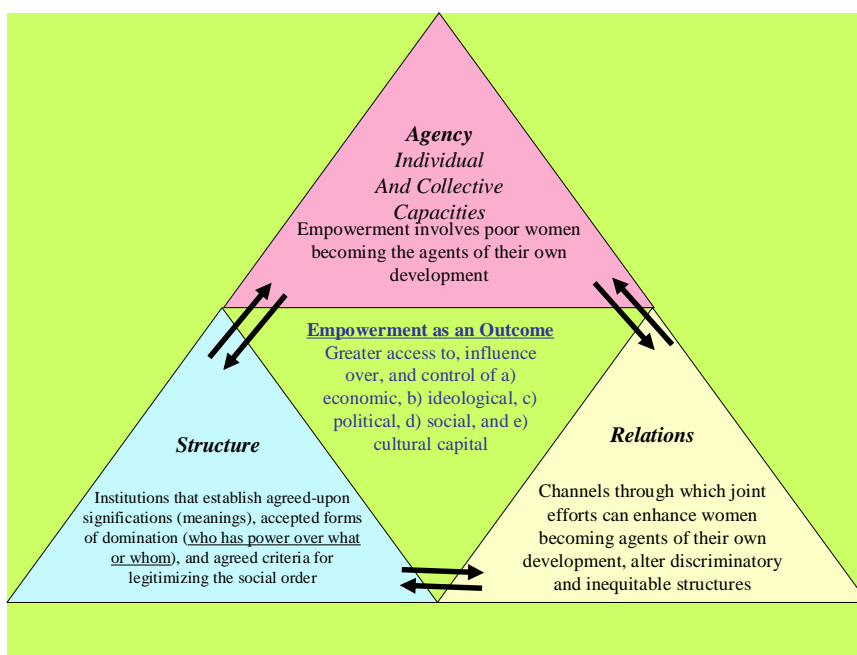
- Working to change gender patterns and power structures which prevent equality and rights for women.
- Supporting and contributing to strengthening international and national political and legal frameworks for equality between men and women.
- Working to increase women's participation in and contribution to development through our four thematic focus areas: 1) Women and Economic Empowerment; 2) Governance and Women's Participation; 3) Sexual and Reproductive Health; 4) Gender Based Violence

### **The Empowerment Framework**

CARE Norway works for the change of structural barriers that hinders the full participation of women in all spheres in society, and combats the present discriminating hierarchy of power between men and women. This also includes the internal, organizational level within CARE both in Norway and in the countries where we work. Key to our programming work is CARE International's Empowerment Framework, which is used to analyse women's empowerment. Empowerment is defined as "the expansion of assets and capabilities of poor people to participate in, negotiate with, influence, control and hold accountable the institutions that affect their lives". This definition recognises empowerment as a process of building capabilities and of the importance of structure as represented by the institutions affecting peoples' lives. According to this framework empowerment can only be realized when all the following three dimensions are addressed/impacted on:

- Agency: e.g. an individual's capacity to make her own analyses, decisions, take actions etc.
- Structure: e.g. the society's routines, patterns, relationships that lead to taken-for-granted behaviour and expectations
- Relations: e.g. individuals' ability to build relations; take joint efforts; mutually support each other to claim and expand their agency and alter inequitable structures.

These three dimensions are intimately related and influencing one another as the figure below implies:



**Fig. 1-The empowerment framework**

The theory is that if women’s individual skills, knowledge and abilities are increased; they have access to, and engage in social networks and the legal and cultural barriers to women’s empowerment are removed, women will be socially, economically and politically empowered. Consequently, although most programmes implemented have women as the main target group, efforts are also made to address institutions and structures surrounding women. It also means working with men and engaging them in efforts for greater gender equality, including working with both men and women to change discriminatory structures which excludes on the basis of gender. This framework has informed the design of most programmes part of this application.

Context specific gender analyses are mandatory in all CARE’s programmes. Our experience is however that if we are to be able to undertake meaningful analyses and to mainstream gender throughout our work we need to have the right skills to do so both among our own staff (in Norway and country offices) as well as among the local organisations we work with. This implies investment in competence and capacity; development of context specific tools and training, and addressing the huge challenge that we all are socialised into gender unequal societies; cultures and practices. During the past two years CARE has taken a number of steps to build this internal capacity:

- The Strategic Impact Inquiry (SII) of 9 projects world-wide aiming to empower women. Results were presented and discussed at a global conference in Oslo in October, 2006, and have among other things informed CARE’s Empowerment Framework, and particularly the realisation of the importance of targeting the structure dimension if real empowerment is to happen.
- Contracting NIBR researcher Berit Aasen to conduct a desk study on “*Aid for Women’s Empowerment – what do we know?*”? The paper discussed what the concept of aid to women’s empowerment may include; what new knowledge, rethinking and dilemmas that are involved in this work, what demands this put on how NGOs work in the field and at head quarter level, and what measures and documentations that may be helpful to respond to this<sup>15</sup>.
- These two initiatives have informed the process to review CARE Norway’s Gender Equality Policy, as well as CARE International’s Gender Network’s work to develop a synchronized gender equality policy for the entire CARE International.

<sup>15</sup> Aaasen, Berit (2008): *Aid for women’s empowerment – what do we know?* An assignment for CARE Norway. Oslo, NIBR, March, 2008.

- In March, 2008, CARE Norway organised a capacity building workshop for all country offices that are part of this application. One of the key outcomes from this workshop was the joint development of 6 Programme Quality Indicators for Gender Equality to inform the design process of the programme part of this application. The indicators are:
  - Expected change towards gender equality clearly defined by programme impact statement
  - Deliberate process of analysis, reflection and learning about gender norms involving women and men
  - Programmes includes significant and pertinent advocacy initiatives about structural causes of gender inequality
  - Regular reviews of progress against gender indicators by participating men and women
  - Gender disaggregated data at all indicator levels, synthesized and analyzed
  - Deliberate process of analysis, reflection and learning about staff competencies and attitudes related to gender programming.
- Country specific initiatives such as for instance the Gender Analysis Framework in Rwanda (presented to Norad in the result report for 2006-2007)
- Cross-country collection of experiences and lessons learned on how to engage men for women's empowerment, and subsequent internal competence building on the same – why and how engaging men<sup>16</sup>?
- Several country specific initiatives as outlined in the various country programmes.

#### **The United Nation Security Council Resolution 1325 on Women, Peace and Security**

October 2008 marks eight years since the UN Security Council adopted Resolution 1325, declaring its intent to end violations of women's human rights in conflict situations. Yet in many parts of the world, sexual and gender based violence (SGBV) is still rampant. In contexts of conflict, such as in the Democratic Republic of Congo (DRC) and formerly in other countries of the Great Lakes Region, SGBV is being used as a weapon of war. The violations have risen to catastrophic levels and their increasing brutality is one of the gravest human rights concerns in the world today. At the same time, SGBV remains an integral part of post- conflict societies, like the communities CARE works with in Rwanda and Burundi.

Another key aspect of the UNSCR 1325 and latter UNSCR 1820 is the importance they put on women's participation in conflict resolution, reconciliation and peace building. Our programmes in Burundi, Uganda and Rwanda are particularly addressing both this aspect and the challenges related to SGBV. In all these countries, specific programme strategies have been developed to actively follow-up the resolution and thus contributing to implementing Norway's plan of action. See country programmes for more information.

CARE Norway is also an active supporter of CARE International's Great Lakes Advocacy Group (GLAG), comprised of the CARE Country Offices in Burundi, DR Congo, Rwanda and Uganda. GLAG addresses sexual - and gender based violence through evidence-based advocacy on women's human rights. The Advocacy Group works with 10 programmes related to women's empowerment/ gender equality<sup>17</sup> in Burundi, DRC, Rwanda and Uganda. This adds an extra dimension to our programmes in this region, as GLAG-advocates work at the local village level with communities, and at the national level to influence policy-makers. Moreover, GLAG seeks to lift-up its grassroots experience in order to influence the international debate on women's human rights in conflict and post-conflict situations.

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<sup>16</sup> Training with Gary Barker, Executive Director of Promundo and Jørgen Lorentzen, researcher at Centre for Gender Research, University of Oslo to take place in CARE Norway in October 2008. This will be followed-up at country office and partner level in early 2009.

<sup>17</sup> Four of these funded through CARE Norway

Also in Norway, CARE aims to continue raising awareness about the resolution and moreover keeping an eye on the implementation of the Norwegian action plan. This will be done through regular information activities, various initiatives in media, as well as participation in policy debates.

### **Climate and environmental issues addressed in CARE's programmes**

Climate and environment is an area of great concern today, and one that is particularly important in development work among vulnerable populations. Predictions for environmental changes in the near future in many poor countries are alarming.

CARE International takes a people-centred approach to adaptation to climate change. This entails *practical strategies* to reduce disaster risks, as well as risks associated with less predictable rainfall, shifting disease vectors, etc. CARE works with local organisations to promote *more resilient livelihoods* (through agricultural innovations, the revitalisation of traditional knowledge and diversification) and tackle the underlying causes of vulnerability (through capacity development, social mobilization and advocacy)

CARE Norway addresses adaptation to climate change and environmental issues in all programmes through poverty reduction and capacity strengthening. Expanding and diversifying people's and particularly women's, economic options and livelihoods has proven to be effective ways of improving possibilities for adaptation. CARE's savings –and loan methodology is one of the main approaches in all the programmes. Not only does this approach improve the economic status and flexibility of individuals and households, but it also entails capacity strengthening on a number of issues. Women with access to and control over resources, more self-esteem and a higher level of education and training are more able to adapt to changing conditions.

Another main approach in CARE Norway's programmes is strengthening the local democracy. We work with both local authorities and civil society to improve management of local resources and democratic processes. We believe that the participation of vulnerable groups in decision making processes will ensure equitable access to resources and services vital to adaptation.

### ***O) Conflict sensitivity***

In line with CARE International Programme Standards Framework, CARE Norway promotes the non-violent resolution of conflicts. We promote just and non-violent means for preventing and solving conflicts at all levels, noting that such conflicts contribute to poverty and denial of rights<sup>18</sup>. CARE follows the Do No Harm Handbook<sup>19</sup>, to make sure our programming is appropriate, and to analyse the outcome of emergency aid in the recipient countries' political and social context, in crisis situations. CARE has a network of county offices in over 65 countries globally, of which CARE Norway works in one third, in Europe, Asia and Africa. We are part of large network of development experts and local partner organisations. The vast majority of the CARE staff in the country offices is local staff with intimate knowledge of the local political and humanitarian context. This is particularly central in the different conflict and post conflict contexts where we are active in such as in Afghanistan, Sri Lanka, Burundi, Rwanda and Uganda. The context naturally differs from country to country and from one conflict to another. But there are some common denominators. In order to have effective development cooperation projects it is vital to have extensive knowledge of the local political, social and economic contexts. We always seek to map out what the situation is like and who is in conflict with whom. We identify the main dividers and connectors, and what the needs are in terms of local development projects, and what the potential impact of our interventions is. We try our best to ensure we help those who need it the most, irrespective of gender, religion or ethnicity.

Another important safeguard for CARE when we seek to ensure sound programming, which at a minimum does no harm in a conflict environment, is that our local staff widely consults the intended

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<sup>18</sup> CARE International Programme Standards Framework. 2003.

<sup>19</sup> The Do No Harm Handbook, CDA, Collaborative Learning Projects. 2004.

beneficiaries in the project design. We empower the target population to guide us in our programming in order to ensure it is culturally sensitive, politically correct and answers a real need on the ground.

### **1.3 POPULAR SUPPORT AND INFORMATION ACTIVITIES**

#### ***A) The Grant Recipient's popular support***

CARE's public profile and support is founded upon its ability to communicate to the general public by having a strong and active voice in the media and by participating in relevant public debates on gender and development, humanitarian access, trafficking, climate change and others. Over the last year, CARE's presence in the media has increased markedly, from a monthly average of 7 stories in 2007, to 130 per month in 2008 (statistics based on keyword "CARE Norge"). This increase in visibility will over time improve CARE's public profile, and, importantly, the public's knowledge and understanding of key issues such as gender and development. This work will be further strengthened in 2009 and beyond, with increased cooperation between programme, advocacy and information work.

Secondly, CARE's popular support is founded upon its group of active supporters. Amongst them are almost 4 000 CARE private donors (CARE venner), who form the backbone of our direct supporters. In addition to the above mentioned media work, our primary channel of communication with these are through the I CARE magazine, which has more than 10 000 active readers. The magazine aims to give a nuanced picture of gender issues, development issues and north-south issues.

In 2008 we overhauled the layout and editorial direction of the I CARE magazine to create a more political magazine with a modern look. A readership survey done in June 2008 shows that 60 % of readers approve of the change of direction, with only 5 % preferring the previous design and content. The same survey also highlights the impact the magazine makes on readers' understanding and view of development issues: More than 80 % of the readers have gained an improved understanding of development issues, and 33 % have become more positive towards development from reading the magazine (0% forming a more negative view).

Finally, CARE's website [www.care.no](http://www.care.no) is becoming a stronger tool for information and communication work, and presently receives around 13 000 visits each month.

#### ***B) The Grant Recipient's information activities***

CARE's media and policy work has two main objectives: Firstly, CARE is a channel to raise the voices of the millions of women, children and men that it works together with in the field. CARE is one of the largest NGOs in the world. This gives CARE a unique position to add a global perspective to the North-South collaboration in Norway. A key objective for the media, policy, and policy related work in the new strategy will hence be to strengthen internal mechanisms to further link CARE's media, policy and advocacy work with the different programmatic work taking place in the field which in turn will enable us to reach more robust positions. CARE's media work can be divided into three categories of news coverage: firstly it is emergencies, secondly stories generated from the programs in the field and finally op-ed pieces. The emergency coverage usually generates lots of media interest in CARE who in most emergency situations is on the ground before the incident occurs. In this media work we strive to also focus on CARE's emergency response targeted at women. So far this year we have had approximately 150 news stories in the press on emergencies in addition we have been featured on the radio and on TV about 20 times. Since 2005 CARE has been in the media in connection with an emergency situation more than 1600 times. A good example of media work that belongs to the second category is the press coverage that CARE gets on microfinance. Since 2005 CARE has been in the print and web media with stories about microfinance more than 120 times. The media coverage in category one and two has rained public awareness and interest in North-South issues as its primary objective. But media work involves more than awareness raining, it also aims to

trigger debate and political change. Op-ed pieces followed by political letters, lobbying and meetings is for CARE and important tool in order to make this happen. We have on average 10 opinion pieces printed each year.

Secondly, CARE works to add the gender and equality perspective to all relevant debates, public hearings, seminars, political letters, meetings with key decision makers and media coverage. One of the public hearings we have actively involved in this year is the draft for a new white paper on development cooperation. In addition we have done extensive advocacy work and media work on the humanitarian situation in Afghanistan, violence against women, trafficking and climate change.

The success of CARE's media, policy and advocacy work will definitely influence three central areas: Firstly, it helps CARE to secure political and financial acceptance from governmental donors while it gives them the platform to fulfil their commitments and bring on board other actors in the global endeavour to end poverty. Secondly, media can be used as an effective and powerful tool for reaching, engaging, and empowering communities isolated by geography, poverty, conflict, or illiteracy. Therefore, through effective use of its media resources CARE plans to bridge information gap, be transparent, and be held accountable to its partners both in the north and south. Finally, the success in media will help CARE to advance its work to the next level, communicate thematic area of focus, shine a spotlight on policy debates, disseminate intervention results and experience, and bring harmony among the work of global development actors.

<b>1.4 FINANCIAL MATTERS</b>
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**A) Grant Recipient's financial basis and funds**

Private funds raised from individuals are the basis for our funds available for the new contract period. CARE Norway had net asset reserves of 15 mill by the end of 2007 and 10,1 mill in private income, total income was 94,1 mill. In 2006 CARE had 14,6 mill in private income, the total income was 91,2 mill . CARE has been awarded the NRK- telethon for 2009. The funds raised in this event will help us to secure the private funds needed for Norad's matching fund requirement. It will also allow us to suggest a significant growth in our programme-portfolio from 2010-2014. This growth is balanced towards the conclusions mentioned in the organizational review in 2007 that we have the necessary organisational capacity to handle such development in a very efficient way. This also means an improved participatory approach, including all stakeholders in the planning process of the expected growth.

**B) Total annual budget**

The total budget for 2008 was 89,4 mill where 89 % of the budget was spent on development cooperation efforts.

**C) Financing development cooperation programmes**

Funding support received from the Norwegian development cooperation administration is presented below broken down by donor and country of intervention.

Country	MFA	Norad
Balkans, regional	1 326	
Croatia	1 424	
Montenegro	763	
Serbia	1 344	
Global	3	1 037
Afghanistan	4 817	
Bangladesh	4 563	
Burma	30	1 697
Sri Lanka	1 713	
Burundi	3 667	2 790
Kenya		2 417
Lesotho	1 394	
Madagascar	2 503	
Mali		14 256
Niger	3	8 249
Rwanda	5	2 859
Somalia	4 077	1 028
Sudan	1 185	
Tanzania		6 346
Uganda	2 350	3 588
Regional East Africa		902
El Salvador	3	
Nicaragua	967	
Other, returns ie	-555	-370
<b>Total public funding</b>	<b>31 582</b>	<b>44 799</b>

Table 1: Geographic distribution of public funding CY07, all figures in 1 000 NOK

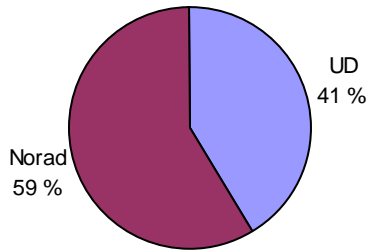


Fig. 2: Public funding CY07 by donor

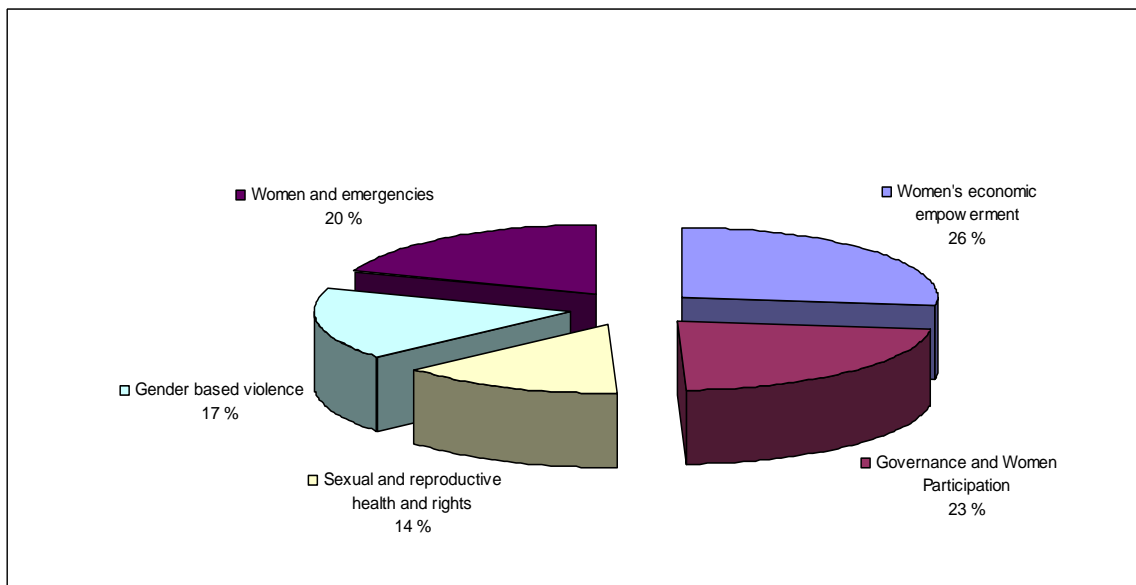


Fig. 3: Thematic distribution of public funding CY07

***D) Fund raising***

The total private funds are raised 50 % from our private individual donors. 25 % are raised from companies/organisations, and 25 % are raised from the lottery (Norsk Tipping).

***E) Audit***

Ernst & Young is the grant recipient's registered auditor.

***F) Membership in the Norwegian Control Committee for Fundraising***

CARE Norway is a member of the Norwegian Control Committee for Fundraising in Norway.

**CARE – Norad multi-year plan 2009 – 2013**

**1.5 BUDGET**

**CARE – Norad multi-year plan 2009 - 2013**

	2009		2010		2011		2012		2013		Sum	
	Total	Norad	Total	Norad	Total	Norad	Total	Norad	Total	Norad	Total	Norad
<b>Afrika</b>	<b>54 216 196</b>	<b>49 531 849</b>	<b>54 216 197</b>	<b>49 531 850</b>	<b>54 216 193</b>	<b>49 531 846</b>	<b>54 216 193</b>	<b>49 531 846</b>	<b>54 216 193</b>	<b>49 531 846</b>	<b>271 080 971</b>	<b>247 659 238</b>
Niger	8 671 848	7 862 907	8 667 681	7 859 128	8 667 687	7 859 134	8 667 687	7 859 134	8 667 687	7 859 134	43 342 590	39 299 438
Mali	18 364 345	17 024 387	18 364 344	17 024 387	18 335 709	16 998 423	18 335 709	16 998 423	18 335 709	16 998 423	91 735 818	85 044 044
Uganda	7 208 329	6 535 911	7 487 460	6 789 003	7 458 205	6 762 477	7 458 205	6 762 477	7 458 205	6 762 477	37 070 405	33 612 345
Rwanda	3 896 504	3 533 024	4 110 905	3 727 425	3 896 509	3 533 029	3 896 509	3 533 029	3 896 509	3 533 029	19 696 935	17 859 535
Burundi	6 405 905	5 808 339	6 405 905	5 808 340	6 405 911	5 808 344	6 405 911	5 808 344	6 405 911	5 808 344	32 029 543	29 041 712
Tanzania	6 998 996	6 346 105	6 998 996	6 346 104	6 998 998	6 346 106	6 998 998	6 346 106	6 998 998	6 346 106	34 994 986	31 730 528
Kenya	2 670 268	2 421 176									2 670 268	2 421 176
Nytt land			2 180 906	1 977 463	2 453 173	2 224 333	2 453 173	2 224 333	2 453 173	2 224 333	9 540 426	8 650 461
<b>Asia</b>	<b>3 346 965</b>	<b>3 034 748</b>	<b>3 346 965</b>	<b>3 034 748</b>	<b>3 346 968</b>	<b>3 034 751</b>	<b>3 346 968</b>	<b>3 034 751</b>	<b>3 346 968</b>	<b>3 034 751</b>	<b>16 734 836</b>	<b>15 173 750</b>
Burma	3 346 965	3 034 748	3 346 965	3 034 748	3 346 968	3 034 751	3 346 968	3 034 751	3 346 968	3 034 751	16 734 836	15 173 750
<b>Global</b>	<b>2 683 752</b>	<b>2 433 402</b>	<b>2 683 752</b>	<b>2 433 402</b>	<b>2 683 752</b>	<b>2 433 402</b>	<b>2 683 752</b>	<b>2 433 402</b>	<b>2 683 752</b>	<b>2 433 402</b>	<b>13 418 760</b>	<b>12 167 010</b>
Tematisk fokus	2 254 952	2 044 602	2 254 952	2 044 602	2 254 952	2 044 602	2 254 952	2 044 602	2 254 952	2 044 602	11 274 760	10 223 010
Seminar	428 800	388 800	428 800	388 800	428 800	388 800	428 800	388 800	428 800	388 800	2 144 000	1 944 000
<b>TOTALT</b>	<b>60 246 913</b>	<b>55 000 000</b>	<b>60 246 914</b>	<b>55 000 000</b>	<b>60 246 913</b>	<b>55 000 000</b>	<b>60 246 913</b>	<b>55 000 000</b>	<b>60 246 913</b>	<b>55 000 000</b>	<b>301 234 566</b>	<b>275 000 000</b>

**Table 2 - Budget for CARE - Norad multi-year plan 2009-2013<sup>20</sup>.**

<sup>20</sup> The programmes are designed and have larger budgets than what is supported by Norad. The comprehensive budgets are included under each country chapter in Part 2.

## **1.6 OTHER MATTERS**

Over the past couple of years CARE International has put a huge effort into redefining its approach in the field. In an effort to address underlying causes of poverty and social injustice and to produce sustainable impact in the societies we work CARE is moving from a project based approach to developing a whole new strategic approach to programmes. The programme characteristics as outlined above in 1.2.E, is one of the concrete outcomes of this change.

The change toward a programme approach has many important and positive implications first and foremost for the primary target group – the women; but also for the operation of the organisation:

- Some countries included in this proposal, such as Mali and Uganda, has integrated three former projects into a programme, and taken advantage of established partnerships on the ground. Other countries has developed a new holistic programme which encompasses three or more of the thematic focus areas outlined above in 1.2.I and Part 2 under Thematic Programmes.
- The CARE Country Office will from now aim to have about three country programmes which are identified as complementary to national or district poverty eradication plans, and harmonized with the larger development partner group in the countries.
- The programmes are all inclusive in nature, and designed to accommodate multiple donors and partners, which mean that the attached country proposals are all potential candidates to be bought into by other donors. This gives the country office, their programme partners and the primary target groups potentially a much higher sense of a long-term development for sustainable change.

## PART 2: PROGRAMME PLANS

### I - PROGRAMME PLANS FOR CARE BURMA Women's Initiative Network (WIN) Project

#### 2.1 Situation Analysis

##### *An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

The United Nations classifies Burma as one of the 49 least developed countries in the world, ranked closely alongside Cambodia and Lao as the poorest countries in SE Asia. The 2005 UN Human Development Index<sup>21</sup> ranked Burma 132<sup>nd</sup> out of 177 countries assessed, with an average life expectancy of 60.8 years (ranked 134<sup>th</sup>), and per capita GDP of US\$1,027 (ranked 164<sup>th</sup>). It is estimated that Burma has one of the world's lowest levels of public sector expenditure. According to the UN, while poverty levels are high throughout the country, the most extreme vulnerability occurs when poverty intersects with geography (highest in remote and inaccessible locations, border areas, areas which have experienced conflict); ethnicity (with ethnic minority groups amongst the poorest); and gender (with women-headed households amongst the poorest).

As is the case in many countries, gender relations in Burma are complex. The Burma Government signed the Convention on Elimination of All Forms of Discrimination against Women (CEDAW) in 1997 and claims that women have equal rights and enjoy equal status with men. Legally speaking this is true. The Constitution of Burma guarantees equality before the law for all citizens of Burma "regardless of race, religion, status or sex." However, women are virtually non-existent in decision-making positions, have great difficulty expanding into traditionally male-dominated forms of employment, receive lower pay than men for the same labour, and play no formal role in local village development structures. Reproductive health, HIV-AIDS, the trafficking of women and girls, drug use and environmental degradation are other important issues with significant gender dimensions, which often negatively affect the lives of women and girls living in Burma. Men have greater control over resources and access to decision-making than women, while there is resistance to recognising the potential of women at all levels and the vital role that they could play to contribute to development.

Women in Burma now represent more than 40% of the active labour force and head 24% of urban households<sup>22</sup>. Agricultural labour is also divided along gender lines, with women allocated many of the harsher tasks. This is exacerbated by inequitable land practices; unequal access to education and training, particularly in rural areas; and formidable local values and practices around gender roles and responsibilities in marriage and community affairs. In village communities, women are seen as dependents – only men can own and inherit land. Woman-headed households are particularly vulnerable economically and socially, and their number is on the rise due to a range of issues, notably HIV-AIDS. Life expectancy for women is 62 years, and the maternal mortality rate is estimated to be at least 380 per 100,000 live births.<sup>23</sup> Many believe that each of these statistics are conservative estimates and represent a significant under-reporting. Reproductive and maternal and child health issues are the main causes of death amongst women of child bearing age, linked to low levels of awareness, and extremely low levels of access to skilled birth attendants. This situation becomes acutely worse in remote areas.

Women live in equally vulnerable situation in the proposed programme areas in the Muse and Namkham townships of the Muse District in northern Shan State. The Muse District offers a range of

<sup>21</sup> UNDP 2005, Human Development Report, UNDP.

<sup>22</sup> Burma Ministry of Economic Planning and Economic Development, 2001

<sup>23</sup> DFID Country Fact Sheet, <http://www.dfid.gov.uk/Where-we-work/Asia-East--Pacific/Burma/Key-facts/>

issues that make it a highly relevant microcosm of Burma's development challenges in general, and those challenges that affect women more specifically. Muse District shares the Chinese border at the northern extreme of Shan State, bordering Kachin State. The capital also is an official border crossing into China. As is the case with border towns the world over, Muse is an important trading town, and is also home to a sizeable sex industry that services the itinerant labour force that come to work there, as well as tourists entering Burma from China. Another challenge lies in Muse's location close to the area that is/was commonly referred to as the Golden Triangle, where opium production and use have long been practiced within many communities. Despite the authority's success in reducing (and in many cases, eliminating) opium production, feedback during the assessment suggests that high rates of drug use remain. With the availability of raw opium reducing, there has been a subsequent rise in the use of refined heroin, commonly injected intravenously. The increased availability of refined heroin has led to an increased number of drug users. Despite drug use being an overwhelmingly male problem, the rise in drug use rates is of considerable consequence to the well being of women, presenting a series of seriously negative consequences for them. These women do not feel empowered enough from either a cultural or governance perspective to take meaningful action to address this or any other problem on their own. The intravenous drug use of men acutely increases the risk of HIV transmission to women who lack the freedom to assert their rights regarding their sexuality and reproductive health.

Options for reducing levels of drug use are very weak in urban areas and non-existent in rural communities. While some education campaigns are in place to raise awareness of the dangers of drugs, they seemed to be having little impact. There is a surprisingly poor understanding of the nature of drug use within communities, with many believing that drug use can be quickly cured through visiting a treatment centre. Treatment options are limited and extremely difficult to access, both in terms of the associated costs and also the distance needing to be travelled. Women express a sense of hopelessness in having insufficient knowledge, capacity and power to affect the drug problem.

In an attempt to change the dire situation of women in Burma, this programme aims to enable women in local Muse communities to more actively participate in community decision-making as a means to both addressing their priority social and economic development issues, and ensuring an ongoing role for women in community direction setting and problem resolution. One encouraging aspect is that interviews with village leadership suggests that the more severely a community is drug affected, the more supportive it is of women becoming more involved in community leadership and problem solving. Therefore, building from this, the programme will have a practical focus to improve women's economic security and reduce their workloads in order to enable them to more actively participate in community affairs. The interventions suggested in the programme are a result of needs assessment conducted with the women in the targeted communities in order to identify their priority needs and interests.

## **2.2 Programme Presentation**

### ***A) Development Goal***

Women in Burma more actively participate in community level decision-making, and are more able to initiate and implement actions to address the economic and social issues that most affect their day to day lives.

Women have articulated reducing the impact of drug abuse as their priority social issue. Harmonization with existing CARE programs and alignment with other development efforts in the Muse area will allow for a holistic response to the needs of women in Muse District in general, and the complex issue of drug abuse in particular. The programme will assume a 'knowledge management' role in Muse, ensuring resources are available to build capacity within Muse for the thorough monitoring, documentation and dissemination of lessons learned in relation to women's empowerment. Strategic alliances will be initiated with national gender focused organizations to allow

their participation, contribution and capacity development. A learning cycle will allow for ongoing improvement of programme activities.

***B) Programme Goal<sup>24</sup>***

By 2013, women's support group members in Muse and Namkham township are able to directly affect positive social and economic change in their communities.

- i. % women beneficiaries who report being more active in decision making in their households and/or at the community level,
- ii. % increase in women support groups member's income
- iii. % community members that report changed attitude and behaviour towards women empowerment

A Women's Support Group mechanism will be established to allow a forum through which women can organize, collaborate and support each other in addressing priority social issues of common interest, and through which training can occur to build women's capacity to more effectively engage in community affairs. Sensitization work will occur with men within the community to explain the rationale and benefits for the whole community of women being more genuinely involved in community affairs, and to encourage men to actively engage with the programme.

Both the broader community and WSGs will benefit from a strategy developed to raise awareness on gender and the potential of women to positively affect change in their communities. Specific awareness raising opportunities will be made available to women with the aim of building an environment from which women are motivated to become more engaged in community affairs. WSGs will also receive technical training to ensure members' have the skills necessary to help resolve priority community issues related to economic security (food production, water supply, savings and loans), wellbeing (reproductive health education, nutrition) and community-based management of drug use. Their success in implementing these programs will be important in securing ongoing support from the broader community for women being more involved in community affairs.

In accordance with the community women's prioritization, the programme will maintain a special focus on reducing the impact of drug use in target communities. The programme will work with harm reduction specialists to develop an innovative community-based response plan that will provide skills and empower all community members to act as a frontline resource to address drug use issues.

***C) Target Group***

The primary target group for the programme is 5,000 poor women living in 20 rural villages across the townships of Muse and Namkham in Muse District who are experiencing vulnerabilities related to economic insecurity, water access and reproductive health issues, particularly those resulting from the presence of drug use in their households. Specific focus will be placed on addressing the needs of female-headed households or households where the woman is de facto head of household (due to drug use of their husband or father).

It is anticipated that there will be a broad range of indirect beneficiaries from the programme. Approximately 30 000 people living in the participating villages, including men and children will benefit from outcomes related to economic security, water supply, and improved capacity to manage drug use. Other CARE programs will benefit from the learning assembled through this program, and improve their gender performance accordingly. It is anticipated that other organizations operating in Muse and nationally will become better equipped to address women's needs.

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<sup>24</sup> This programme in Burma will start in 2010. Due to the cyclone *Nargis* in May 2009, the previous programme was extended with one year (through 2009).

**D) Expected Results**

**Expected outcome 1:**

Increased economic security for Women's Support Group members

- i. % of WSG members reporting increased decision making over family finances
- ii. % women reporting an increase in access to and control of productive resources

**Expected outputs:**

1) WSG members participating in community-based income generation activities

- i. # of WSG members participating in income generation activities.
- ii. # of members have taken loans for profitable income generating activities
- iii. % of members are producing marketable products

2) WSG members participating in loan and savings schemes

- i. # WSG members participating in or who have graduated from loan and savings schemes
- ii. Saving and loan schemes operate with 98% repayment rate

**Expected Outcome 2:**

Reduced impact of drug use in target communities

- i. % of community members who report attitude change on drug use
- ii. %/# of community members that are engaged in delivering support & community counselling to drug users
- iii. % of community members who report increased support from within their community to respond to drug related challenges

**Expected outputs:**

1) Health education sessions are conducted for community members on drug use and harm reduction approaches

- i. # and type of health education sessions conducted
- ii. # of community members that report increased knowledge on drug use and harm reduction approaches

2) Skills development trainings are conducted with community members on counselling and treatment referrals

- i. # of skills development trainings conducted for community members.
- ii. # of trained community members that report being confident to deliver support to drug users

3) Communities develop and implement action plans to reduce drug use and manage drug related challenges

- i. # of action plans developed and implemented by community members
- ii. # of drug users seeking support and treatment from community initiatives

**Expected Outcome 3:**

Barriers to women's social development and participation addressed.

- i. % of women that report meaningful participation in decision-making bodies at community
- ii. % of WSG members who report increased health-seeking behaviour
- iii. % of women and girls surveyed that report workloads have been reduced due to water system construction

**Expected outputs:**

1) Gender awareness raising sessions conducted with community members

- i. # of gender awareness raising sessions conducted with community members
- ii. % increase in sampled community members who report improved understanding of gender equity

- 2) Women actively participate in community activities
  - i. % of village development committee members who are women
  - ii. % of community leaders who report active participation of women in village level development activities
- 3) Increased awareness among community members on health related issues
  - i. # and type of health education sessions for men and women held in target communities
  - ii. # of capacity building trainings in SRH and HIV held for local Health Service Providers
  - iii. # of target community women accessing appropriate health services
- 4) The water systems in the community are improved
  - i. # of community water systems constructed/renovated
  - ii. # of community members accessing water from project constructed/ renovated systems
  - iii. # of water management committees formed and trained

**Expected Outcome 4:**

Effective and efficient internal and external program learning

- i. # and type of mechanisms used to share lessons learned
- ii. Program lessons learned are documented and integrated into annual planning

**Expected outputs:**

- 1) Operationalize lessons learned through promotion of program activities annually
  - i. # of experience sharing sessions conducted among CARE staff through cross visits, local and national sharing opportunities
  - ii. # of reviews of activities conducted with stakeholders at local and national level annually

***E) Anticipated Risks***

***Assessment of anticipated risks and how these may be countered***

Major risks for this Programme and their mitigation/management strategies include:

- *Necessary approvals for CARE to operate in the project location are withdrawn or not forthcoming*

Government approvals are essential for project implementation, and any changes to the current approvals enjoyed by CARE for operating in Muse would significantly affect programme implementation. CARE staff pay close attention to managing this relationship, and have been encouraged by Township authorities to expand CARE's portfolio of work in Muse. Unfortunately, this relationship would not be able to withstand any higher level Government directive to the Township for CARE to cease working in the area. To mitigate this risk, CARE Burma's national office also invests significantly in relationship building with the appropriate authorities at national level.

- *Sensitivities related to the concept of women's empowerment restrict progress*

The concept of 'empowerment' is sensitive in Burma owing to the political connotations associated with it; women's empowerment is arguably even more sensitive. For these reasons, it is important that the programme not be seen by authorities as being overtly political in its objectives. To successfully operate in the development sector in Burma, as CARE has been able to do since 1995, requires that an organization be able to skilfully navigate its way around sensitive issues, while always maintaining an eye on the goal that is trying to be reached. It is also important that the goal is realistic and achievable within what is known of the current operating environment in Burma. It is believed that this modest programme can succeed in empowering women, within the framework of a livelihoods approach that focuses on resolving tangible and irrefutable development issues. Women's empowerment will occur

through organizing and training women, and raising awareness of their potential to resolve issues that authorities and community members alike regard to be critically important.

- *Difficulties related to ‘curing’ drug use*

Even in wealthy developed-nation contexts where extensive resources and expertise are available, drug use issues are notoriously difficult to resolve. It is not the intention for this programme’s interventions to be a ‘silver bullet’, measured by the number of addicts in target villages that are able to break their habit. The aim of the programme is to empower women with knowledge and skills so that they begin to feel some capacity to positively affect the drug abuse issue that is currently such a problem in their lives.

- *Ensuring appropriately skilled staff are available to the programme*

Muse is an isolated town sitting on the Chinese border that is effectively two days travel from Yangon. It is therefore not a location that is attractive to all people. CARE’s approach is to recruit and train appropriately skilled local community engagement facilitators so that they are able to 1) work very closely with local communities, 2) build trust with local village leadership, 3) ensure an intimate knowledge of participating community dynamics, and 4) communicate fluently in the minority language most prevalent in their community. There will certainly still be a need to recruit staff into Muse from elsewhere in Burma. Recruitment processes will focus on assessment of applicants’ suitability to work effectively in Muse. An appropriate benefits scheme of both financial and non-financial incentives will be provided to ensure high quality staff are motivated to apply.

#### ***F) Relevance to Donors and Recipient Countries***

##### ***Analysis of the relationship to other donors, recipient authorities and their official plans and goals***

**Development Partners:** Muse benefits from a tightly knit development community that works closely together and is collaborative in its work. These strong levels of cooperation stem from the fact that virtually all organizations operating in Muse are focused on common and related issues, mostly around HIV-AIDS and harm reduction. The Consortium, as the name suggests, is a consortium of organizations working together to holistically address HIV issues, funded through the Three Diseases Fund (3DF) – a multi-donor facility for funding of programmes related to tuberculosis, malaria, HIV and AIDS. The Consortium program is implemented across 17 Townships in Burma, of which Muse is one. Consortium members are CARE, Save the Children (lead), Marie Stopes International, and the Burma Nurse and Midwives Association. This existing and effective working alliance of some of Burma’s most well-established NGOs will form an important resource and partner for this programme. Other international development organizations delivering relevant programmes in Muse include WFP, UNODC (through the Muse Outreach Project) and AZG (MSF-Holland). Key local organizations include the Burma Anti Narcotics Association and the Burma Maternal and Child Welfare Association.

CARE is known to these organizations and maintains close communication with each to monitor their program direction so that complementarities can be maximized and overlap avoided. Encouragingly, each of these organizations is committed to the empowerment of women, and is supportive of the proposed programme approach.

**Local Authorities:** CARE has maintained a program in Muse without incident since 1998. CARE is well known to local authorities, respected and trusted for its professionalism and ability to deliver high quality outcomes around issues of high priority for Township authorities. Local authorities openly acknowledge the threat posed to their communities by drugs and HIV, and are supportive of NGOs working to lessen the problem. At village level, village leaders recognize the potential of women to contribute to resolving community issues, and in many cases reflected on their own failings and the need for ‘new approaches’ to be tried. This was especially true of communities that were severely affected by drugs.

### ***G) Grant Recipient's Added Value***

#### ***Assessment of the Grant Recipient's contributions to local partners other than financial***

Through this programme, CARE will facilitate the establishment of women support groups as a forum for women to be organized and help each other. Through these groups, CARE will carry out different capacity building and awareness raising trainings to enable women to effectively engage in community affairs. CARE will sensitize men and the general community including local leaders on the benefits of empowering women to bring about community development. CARE will also invest on its relationship with the government to ensure that the environment vis-à-vis the government remains favourable for the continuation of the programme. CARE will work on the development of practical skills within communities (specifically amongst women) to address community issues, notably the skills and knowledge required to address drug use and reduce its impact. Furthermore, the capacities of individuals and communities to self-manage development programs will have been developed, offering a sustainable capacity into the future whereby communities can themselves initiate and implement their own development programs.

CARE also aims to be catalytic in bringing sharper focus to gender issues at a national level, through documenting and disseminating knowledge gathered in Muse in a form whereby it is of relevance to all development actors considering issues of women's empowerment.

More specifically, the programme aims to develop a model for community based management of drug use that empowers communities in the battle against drug use. This model will be developed in such a way that it can be adapted and implemented in other isolated drug affected communities.

### ***H) Local Partner Organisations***

#### ***Analysis of whom the local partner organizations represent and their roles/strengths in civil society***

The programme will initiate a multi-faceted relationship with the Yangon-based NGO Gender Group whereby the programme can both benefit from and contribute to the NGO's knowledge base and experience. The gender group NGO's vision of wanting to "influence NGOs in Burma to integrate gender in their policies, practices and programmes, and to promote gender equality, including the empowerment of women" complements the programme approach closely. While it is small and still relatively young, the gender group NGO is one of very few genuine NGOs to have emerged in Burma, and therefore is an important trailblazer for Burma civil society.

While it has long had close Government links, the reputation of MANA (Burma Anti-Narcotics Association) in 2009 is that of an emerging NGO with a strong interest in civil society and working with communities to reduce the impact of drug use. The Programme will partner with the Burma Anti-Narcotics Association, in conjunction with the Burnet Institute (a respected Australian NGO with a long history in harm minimization approaches), to ensure the best possible technical knowledge is available in relation to reducing the impact of drug use.

### ***I) Contribution to Civil Society***

#### ***Analysis of how the Programme assists strengthening of civil society***

Civil society is a term that generally refers to all groups, small and large, which act independently of Government. A flourishing civil society suggests an open political and economic system whereby all members of the community can choose to organize and participate as they so choose. On the other

hand, a weak civil society generally refers to heavy handed centralization of power, and an unwillingness to tolerate dissent. While Burma's civil society remains weak, there are signs of a slowly opening space for it to develop. Strategies to strengthen civil society in Burma need to occur within the context of the various administrative forces that influence the current operating environment. It also needs to be accepted as part of Burma's ongoing 'civil society' evolution, that emerging civil society groups will require some form of blessing from local authorities to exist.

In this context, the programme will further the progression of Burma's civil society by supporting marginalized women, who to date have had no stake or opportunity to actively participate in the development process, to develop the necessary knowledge, skills and capacity to organize themselves to address issues of common concern. Specific focus will be placed on supporting vulnerable women to collaborate and address issues of common interest and concern. At the programme's conclusion, Women's Support Groups will have been established at community level and will have an ongoing capacity to organize and address community issues into the future. Important sensitization work will have been done with local authorities to raise awareness of the many different benefits that will come from this approach, and any perceived threat that the approach may have been seen to pose will have been demystified. The programme will facilitate relationships between Women's Support Groups and those agencies at Township level or beyond that might be able to support WSG efforts into the future. WSG's will organize and receive training around *their* livelihood issues of importance, notably income generation opportunities, savings and loan schemes and water supply management. Communities will also be supported to work collaboratively to address issues related to sexual reproductive health awareness and practice, and drug abuse issues.

All of the above will occur within a framework of holistically promoting the role of women, to be heard within the community and to participate and contribute to decision-making. It is believed that this logical, bottom-up process can be effective in enabling genuine change to occur within participating communities.

A strong learning and documentation approach will allow for lessons learned in the programme regarding women and civil society to be made available to all interested parties, with the aim of the approaches being transferred and adopted in other locations that are facing similar challenges.

#### ***J) Women's Rights. Equality and the Environment***

##### ***Description of how women's rights and equality, and climate and environmental concerns are attended to in the Programme***

###### **Women's Rights and Equality**

The rationale and approach for the overall programme is the empowerment of women through raising awareness of women's rights, facilitating greater opportunity for women's participation in community affairs, and generally enabling an environment whereby deeply subordinate and disempowered position of women in Burma begins to change.

Specifically, this Programme will address the rights and empowerment of women through the following approaches:

a) Initial participatory appraisal processes in target communities have already worked with men, women and girls to analyze key community issues, gender disaggregating the cause and impact of these issues. This initial engagement with target communities has been successful in establishing an environment whereby both men and women recognize the additional layers of disadvantage experienced by women when compared with men. This approach has established a constituency within the community for innovations to be tested, and has fostered goodwill amongst participating village leadership groups to actively support women becoming more involved in community leadership.

b) Women will be supported to develop the skills necessary to 1) identify their priority needs (through cost-benefit and other analytical exercises), 2) develop knowledge and skills to address those priority issues, and 3) organize themselves as a group, based on the principles of inclusiveness, respect and active participation of all. This collection of skills will allow women to organize as Women's Support Groups (supported by the programme); with the aim being that these groups will sustain themselves post-programme.

c) Women living in particularly difficult circumstances are frequently time poor, and often exist on the perimeter of community life due to discrimination and class structures. The needs of such women will be a specific focus for the programme, with individual strategies being tailored to help enable their participation and empowerment.

d) The programme recognizes the importance of working with men, both in terms of hearing their perspectives, raising awareness of the programme purpose and rationale, and in mobilizing their goodwill and support for the objectives of the programme.

**Climate and environmental concerns:** The environment of Muse and surrounding areas has been seriously affected by rampant illegal logging that has occurred mostly over the past two decades. In some cases there is no longer any remaining forest within reach of local communities. In other cases, the little that remains is being over-exploited and will soon disappear. This situation also affects water quality, water availability and soil fertility. The immediate impact is less production leading to household food and water insecurity, and reducing incomes. For women, the impact is even more severe as they are required to search further for water and firewood.

The Programme fully recognizes the short, medium and longer term threats posed by environmental degradation and will work with communities to raise awareness of these issues, and to develop strategies in response. The following specific programme activities will positively affect climate and environmental concerns:

a) Water quality and supply issues will be assessed and water management plans established for participating communities that both address the community's water problem, while also utilizing the need for a water management committee as an entry point for enhancing women's participation in community affairs.

d) A general programme of awareness-raising will occur in relation to environmental issues, and the contribution that community members can make to protection of the environment. While such a program would benefit the whole of a community, women stand to benefit greatly given their responsibility for water and firewood collection.

In addition, analysis will be conducted on the role that firewood collection and charcoal production play in the household economy, with a view to developing alternate income generation schemes. Where feasible and appropriate, community reforestation programmes may also be initiated as well as home gardening, winter cropping and composting in later years.

Moreover, the CARE Annual Operating Plan for 2009/10 includes increasing staff awareness on climate change and reviewing project implementation in at-risk areas to determine necessary adjustments. To support this, a part-time Climate Change Advisor has been recruited to provide technical support to the team through this process.

## ***K) Sustainability***

### ***Plans for phasing out the Programme and ensuring sustainability***

The Programme approach is to holistically and systematically consider, address and promote the issue of women's empowerment, especially as it plays out in isolated, rural, ethnic minority communities. A

## CARE – Norad multi-year plan 2009 – 2013

key performance measure for the programme will be the sustainability of its approach. To ensure sustainability, the following strategies will be put in place:

a) *At community level*, a significant effort will be made at programme commencement to ensure all subsets within the community understand the rationale of the approach. While the programme will focus on responding to the priority needs articulated by women, it is planned and fully expected that most community members will enjoy some benefit from programme activities. By facilitating positive ‘women-led’ outcomes for the whole of community, it seems reasonable to assume that communities would be supportive of an ongoing role for women in community affairs.

Women’s Support Groups will be established within communities as a mechanism for ongoing management of community issues. These groups will be established in a form that 1) builds their general capacity to organize, administer and foster women’s participation, 2) allows development of the basic technical skills necessary to dealing with various priority issues, and 3) fosters direct linkages between the WSGs and other agencies relevant to the WSG’s purpose. This approach should position the WSGs to continue into the future. Moreover, specific attention will be paid to ensuring that the WSG approach is financially sustainable and not reliant on significant input from external agencies.

The programme will also work to develop effective relationships between local authorities and community efforts, and to foster support from local leadership for the approach.

b) Within Muse, the closely-knit development community is committed to harmonizing and supporting this women’s empowerment approach, through reviewing their own programs to ensure they are addressing the needs of women. This approach will allow WSGs the opportunity to establish relationships with a range of different development agencies, positioning them well for the future.

c) A strong monitoring and evaluation system will ensure that the approach is well researched, documented and disseminated, in order to build support for the approach and therefore build a constituency that links women’s more active participation with good development outcomes. The programme will share this learning with key partners in Muse.

d) The programme will work extensively to build a broad-based constituency for women’s empowerment in Burma, thus facilitating other development organizations to become more effective in addressing the needs of women.

### **L) Total budget**

The budget below presents the total programme budget:

BURMA	2009 <sup>25</sup>	2010	2011	2012	2013
Norad	3 035	3 035	3 035	3 035	3 035
CARE Norway (matching funds)	312	312	312	312	312
To be secured	608	2 100	2 060	2 024	2 026
Total programme	3 955	5 447	5 407	5 371	5 373

<sup>25</sup> Final year of the “Sowing a Healthy Future” programme

**II- PROGRAMME PLANS FOR CARE BURUNDI**  
**UMWIZERO: A Positive future for women in Burundi--PHASE II**

## 2.1 Situation Analysis

### *An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

After 13 years of civil war, Burundi is finally on the path to peace and economic development. Development indicators, however, remain low, particularly with respect to women and girls. Women occupy only 28 percent of private sector jobs, and due to a lack of collateral, they receive only 1.9 percent of loans made by commercial banks. Because primary school is free, the enrolment rate for girls is high compared to other developing countries (54 percent); however, only 10 percent of girls who graduate from primary school go on to attend secondary school.

Women are the foundation of the household in Burundi. In rural areas it is the women that cultivate the fields, fetch water and wood, feed the family and care for the sick. However, they have little control over the use of household resources or any income earned. Such decisions are normally made by the man. Women have limited access to information and as a result are unaware of legal frameworks, their rights or major decisions being made in the communities. Furthermore, as within the household, women have no voice in decision making at the community level or higher. Thus, there is much to be done to improve gender equality. A number of factors impinge upon the integration of gender into the country's socio-economic development. One major factor is deep-rooted cultural habits, which stand in the way of gender equality and women's representation in decision-making bodies, as well as women's involvement in the economy. Gender based violence is rampant in the Burundian society; including rape and physical and psychological abuse. The frequency of this type of violence further prevents women and young girls from fully participating in the development of the country, but CARE's research on empowerment indicates a strong interest from both men and women to address sexuality and reproductive health<sup>26</sup>.

The social fabric of communities in Burundi has been significantly weakened due to the years of war. As a result solidarity between households in a community has in many instances disappeared. Each individual within a household as well as in a community has little faith in the future and focuses primarily on daily survival. In Burundi, as in many conflict situations, gender roles change and women traditionally take on even more responsibility in ensuring household members are fed and looked after. CARE's research shows that women are interested in participating in associations so as to rebuild social networks<sup>27</sup> and improve social position.

The international community has supported the Burundian government in designing a Poverty Reduction Strategic Plan (PRSP) and a Strategic Framework for Peace building covering the period 2007-2010. Bi-lateral and multi-lateral donors have recently pledged funds for their implementation.

The strategic axes of the PRSP are:

- i. Improving governance and security;
- ii. Promoting sustainable and equitable economic growth;
- iii. Developing human capital;
- iv. Combating HIV and AIDS.

The Burundian government has in its report to the CEDAW commission in 2007 also highlighted priority areas to address, some of which are: rural women's economic dependency due to lack of credit, sexual violence, the vulnerability to sexual exploitation of women and orphans, and the fight

<sup>26</sup> Etude sur l'empowerment, Umwizero, CARE Burundi, 2007

<sup>27</sup> Etude sur «la vie associative», CARE Burundi, 2006

against HIV. Despite these challenges, bringing a voice to the poor and to the marginalised women is indeed possible as the first phase of Umwizero has shown. This programme, like CARE Burundi's strategic plan is designed to be flexible given the constantly evolving social and political climate in Burundi. Guided by our vision, embedded in CARE's Empowerment Framework<sup>28</sup> and international conventions such as CEDAW and UNSCR1325 the programme seeks women's empowerment while adapting to day-to-day conditions of insecurity, seasonal changes as well as the evolving political environment in the build-up to the 2010 elections.

## 2.2 Programme Presentation

### A) Development Goal

**Development goal:** Women in Burundi are economically, socially and politically empowered, realising their rights and are valued by society for their important contribution in shaping and driving the development of Burundi<sup>29</sup>

### B) Programme Goal

**Programme goal:** By 2013, women members of Solidarity Groups<sup>30</sup> in Ngozi, Kirundo, Kayanza and Muyinga Provinces are economically, socially and politically empowered

- i. % women reporting an improvement in their economic security
- ii. % women claiming they have access to social safety nets when they need it
- iii. % women reporting an increase in participation in decision making at household - and community level
- iv. % women holding decision making positions at community level

The programme's theory of change for this project is based on the **CARE's Empowerment Framework** (see Part 1.2.N) that has been used for the situational and problem analysis, as well as the intervention strategy. The theory is that if a woman's individual skills, knowledge and abilities are increased; they gain access to and engage in social networks, the legal and cultural barriers to women's empowerment are reduced, and women will be socially, economically and politically empowered<sup>31</sup>.

### C) Target group

The primary impact group include 103 060 women from the age 15 and above in Ngozi, Kirundo, Kayanza and Muyinga provinces. These are women who are or will be members of 5153 Nawe Nuze Solidarity Groups. The indirect beneficiaries are the members of their households, thus a total of about 620 000 on the basis of the average household of 6 persons.

Target groups include, in addition to the female group members:

- 859 female Community Animators that will be trained in the Nawe Nuze approach and they will then train solidarity groups. Each Community Animator will work with a total of 6 groups per cycle and each cycle lasts 10 months.

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<sup>28</sup> As outlined under point 1.2.n.

<sup>29</sup> At the time of writing the programme structure with the larger CARE Burundi programme on Women's Empowerment (as part of the country office' move towards a programmatic approach – ref. to point 1.2. c) has not yet been established, and the goal of this programme will be finally formulated in FY 09 – by June 09.

<sup>30</sup> The village savings and loan groups in Burundi – also known as Nawe Nuze

<sup>31</sup> As outlined under point 1.2.n.

- The traditionally marginalised Batwa communities. With the first phase of the programme, it became evident although they join in the savings activities, they are reluctant to take loans, and take little initiative to develop income generating activities, as they are not very familiar with a cash economy. The programme will pay particular attention to this group's special needs for follow-up.
- Individual men, as they in general represent important barriers to women's empowerment, and therefore also are the primary levers for the advancement of women's wellbeing. The reproductive health component will be targeting youth and couples in particular. Men will also participate in skills development around HIV and AIDS as well as education on legal frameworks and the rights of women.
- Nawe Nuze Groups of men, where these have an objective of promoting greater gender equality. These groups will be trained by the same female Community Animators.
- A network of male and female change agents (known as Abatangamuco) to promote gender equality, women's rights and the eradication of traditional harmful practices.
- 500 community facilitators for Reproductive Health and 500 community facilitators for Human Rights (one for each commune) will identified and trained by partners.
- Communal structures, traditional leaders and conflict resolution structures and local administration will be targeted by advocacy initiatives to have women included in decision making processes.

#### ***D) Expected results***

##### **Expected outcome 1: (addresses *the agency dimension of the Empowerment Framework*)**

Women and girls have increased economic security and life skills

- i. % women reporting control over their savings and income
- ii. % women and men reporting an increase in their ability to make informed choices with regards to sexual and reproductive health
- iii. % women reporting a greater understanding of and agreement with their rights

##### **Expected outputs:**

1) Women and girl members of Nawe Nuze groups have started or developed their income generating activities

- i. X # of Nawe Nuze groups have been trained in income generating activities (individual and group activities)
- ii. X # of members reporting taking loans for profitable income generating activities

2) Women and girl members of Nawe Nuze groups are making informed choices based on increased life skills, particularly with regards to reproductive health

- i. X # of women and men, of which X % are between the age of 15 and 20 years (adolescents) receive information with regards to their sexual and reproductive health

3) Women and girls can understand published information of relevance to their rights and livelihoods

- i. X # of women and girls have received literacy training
- ii. X # of women and girls have received training on their rights (E.g. Burundian legal frameworks and international conventions such as CEDAW and UNSCR1325)

##### **Expected outcome 2: (addresses *the relation dimension of the Empowerment Framework*)**

Women and girls have built organisational capacity and reinforced social networks

- i. X % of Nawe Nuze groups functional and autonomous 6 months after liberation
- ii. X % of women, members of Nawe Nuze groups established in social networks reporting an increased confidence and social cohesion

##### **Expected outputs:**

1) Nawe Nuze groups are operating credit and savings activities and abiding to democratic rules and internal regulations

- i. X # of Nawe Nuze groups from previous phase have been liberated
- ii. X # of groups trained in the basic Nawe Nuze modules in year one, liberated after 6 months,
- iii. # of Village Agents trained in the Nawe Nuze module and having passed the test for certificate
- iv. X # of Village Agents providing services to Nawe Nuze groups and being paid by the groups (payment determined by members of the groups, so may not be uniform across groups)
- v. # of NN groups established in advocacy networks

2) Women are using their skills in conflict resolution

- i. X # of communities where colline leaders refer to Nawe Nuze women as conflict mediators
- ii. # of Nawe Nuze groups that have undertaken at least one conflict prevention/resolution activity in their communities

3) Nawe Nuze groups are creating networks to raise awareness about issues affecting women

- i. X # and type of initiatives undertaken by Nawe Nuze group networks

**Expected outcome 3: (addresses *the structure dimension of the Empowerment Framework*)**

Women's and girls rights are being promoted and defended by men, women and local leaders

- i. % of men (including youth) reporting a greater understanding of and agreement with women's rights
- ii. % of women and men reporting positive behaviour change with regards to gender relations
- iii. % of women holding positions at the community level and representing women's rights and concerns
- iv. % of communities that have plans made at community level that favour women (have taken into account the rights and concerns of women)

**Expected outputs:**

1) Men are actively promoting gender equality through telling stories of their own behaviour change (*Abatangamuco*) in all programme areas

- i. Network of X *Abatangamuco* established
- ii. # of meetings organised and facilitated by *Abatangamuco* in all communes

2) Issues around gender and women's rights are being discussed constructively in all communities

- i. Tubiyage theatre performs X interactive theatre and community debates regarding gender equality and women's rights in the target area
- ii. # of radio programmes produced and aired discussing gender equality, women's rights, reproductive health and democracy etc.

3) Awareness and support of women's rights is increased in target communities

- i. # and type of advocacy initiatives undertaken by Nawe Nuze being supported by local administration in each commune
- ii. # and type of plans made at commune level that are in favour of women (specific changes to existing plans or new plans made that include activities that will address women's concerns and rights)
- iii. # of Nawe Nuze members presenting themselves as candidates for communal elections

***E) Anticipated Risks***

***An assessment of anticipated risks and how these may be countered***

The major project risks and their mitigation/management strategies include:

- *Security situation.* Since the elections in 2005 and the signing of the peace agreement in 2006, security has continued to improve in Ngozi, Muyinga, Kirundo and Kayanza Provinces. However, recently the last rebel group, Palipehutu FNL and the army started fighting again. At the same time there is comprehensive political manoeuvring and preparation for the 2010 elections going on. Political parties are already planning on how to maintain or gain power in 2010 and this is not only through promoting development policies, in some cases it appears to be deliberate promotion of insecurity. There are several on-going dialogues addressing the situation (e.g. the peace discussions with the FNL supported by the regional community, as well as the “cadre de dialogue” supported by the UN Peace Building Commission). In addition local media is actively reporting on issues. There is thus a certain transparency within the rather non-transparent political situation. Many national organisations, international NGOs and other bodies are already implementing and designing projects that will promote open dialogue around the lead up to the 2010 elections with an emphasis on the importance of civic responsibility and peace. Given the local, regional and international interest and pressure, it is envisioned that these bumps in the road to democracy will be surpassed and political stability will win and be followed by security.
- *Elections in 2010.* The network of women’s solidarity groups has already been viewed as a threat by some: a group of informed and educated women speaking their opinions. It is highly likely that these solidarity groups will be targeted by political parties leading up to the elections and pressure to be made on group members to support one party over another. In addition female members of solidarity groups that are enjoying involvement of decision making have indicated that they want themselves to stand for the next elections. These women might coerce their solidarity group members to vote for them. The programme will have a special focus on education in civic responsibility so that regardless of the status of the women, the opinion of group leaders or the pressure of political parties, women will make their own informed choices in the elections and the solidarity groups will remain transparently governed structures and not political tools.
- *Effective and transparent governance.* The current impasse in the parliament and the senate has become a major concern for international donors and other institutions. Measures are thus being taken to address the situation and help government institutions back on track. This is critical so that the population can regain confidence in the government but also so that the elected officials can pass the numerous pending laws such as the Code on family and inheritance. However negative at the national level there are some positive changes at the grassroots level since the elections. Under-performing elected officials have been removed by their communities and transparency in decision making has been insisted upon in a few cases, which is positive given that this is the first experience in democratic governance that the country has had since independence. This has been supported by the extensive local media coverage as well as certain development programmes addressing decentralisation. There is also a noted increase in transparent governance and decision makers in areas where the Umwizero programme has been implemented and women state that their voices are increasingly being heard. The programme per se is thus contributing to minimising this risk at the lower levels.
- *Men as active supporters.* Men are used to being the traditional leaders in communities and the focus of most decision making as well as programming. The culture dictates that the man controls all resources; and disrespect and violence against women is generally accepted. Traditionally women do all the labour and retain all income from the sale of harvest or other produce. Men make all the decisions regarding household resources and investment. As male community leaders are used to controlling resources and inputs from emergency and development programmes<sup>32</sup>, they often resist interventions that focus on women. CARE has advanced a long way in working to change the attitudes and behaviours of men. On a basic level CARE ensures that the programme is introduced to the community and explains what activities will be for women only and when men

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<sup>32</sup> Power Relations Study, CARE 2005

will be invited. This often creates resistance among men. Often women themselves adopt strategies for convincing the men. The most important support in addressing men who are reluctant to change is however other men that have changed and see a positive impact in the households. CARE is working with an association of male change agents. These are men who have gone through a process of change who are “sharing their story” (e.g. if they stop beating their wife she can become more productive and/or including her in household decision making improves the decisions and investments<sup>33</sup>).

#### ***F) Relevance to Donors and Recipient Countries***

##### ***An analysis of the relationship to other donors, recipient authorities and their official plans and goals***

CARE works in close collaboration with the Ministry of National Solidarity, Human Rights and Gender at both the national - and provincial level. CARE represents international NGOs on the SGBV coordination committee, as well as led the working group on Gender during the elaboration of the Burundian PRSP. These committees also include various UN agencies such as UNIFEM, UNFPA and UNICEF, as well as government ministries. CARE is also currently the vice president of the International NGO network, RESO, and has been active on the executive committee since its creation.

CARE also cooperates closely with several national NGOs be it in the implementation and design of activities or in relation to key advocacy issues. Together these organisations create a rather large network of organisations that are interested in promoting the rights of women. To date actors have come together to advocate around the role and place of women within government, election process and inheritance.

#### ***G) Grant Recipient's Added Value***

##### ***An assessment of the Grant Recipient's contributions to local partners other than financial assistance – in other words what is the added value of the Grant Recipient***

CARE will play different roles in terms of supporting national partners. Some partners have solid administrative and financial structures and do not need assistance in those areas, whereas others are weak and need more technical support. Some partners need support in addressing internal structures and policies as well. When finalising each partner's agreement, specific capacity building needs will be taken into consideration and included in each plan and budget.

Partnership is key to our implementation approach. The programme will receive oversight and coordination from the programme Steering Committee that will meet on a bi-annual basis and will consist of representatives from each partner organisations, each of the Provinces as well as Ministry of National Solidarity, Human Rights and Gender. Already as a part of CARE's strategic planning process partners contributed substantially. Thus, this programme has been designed with active participation of partner organisations. Through this, partners gain valuable experiences in strategic planning and build their capacity to both respond to local needs and to hold local and national authorities accountable when needed.

#### ***H) Local Partner Organizations***

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<sup>33</sup> Empowering approaches to Women's empowerment, August 2007

*An analysis of whom the local partner organisations represent and their role/strengths in civil society*

The following organisations and institutions will take part in implementing the programme:

**ABUBEF**

ABUBEF was founded in 1992 with the purpose of following up the recommendations coming out of the UN Conference on Population and Development held in Bucharest. Currently its mandate is to put in place the recommendations from UN conference for Women, more commonly known as the Beijing Conference as well as the recommendations from the UN Conference for Population and Development that was held in Cairo in 1993. ABUBEF is a member of the International Federation of Family Planning (IPPF). Its target population is women, children and youth. The organization is comprised of 300 volunteers and governed by a committee of these volunteers.

ABUBEF is a current partner with CARE in the Umwizero programme as well as another CARE programme addressing adolescent girls' empowerment. ABUBEF has been the leader in addressing reproductive health, sexuality, HIV and AIDS and literacy training. They have performed successfully and have made significant advances within the field of their experience.

**APDH**

APDH was founded in 1995 by a group of students who had been active members in human rights clubs in schools that were supported by the national human rights league ITEKA. The students wanted to introduce a culture of peace and reconciliation based on the events that took place in Burundi in 1993 with inter-ethnic violence. Their purpose was to bring together people of different ethnic groups and find solutions so that the population would not be divided along the different ethnic groups as they had in 1993.

APDH has been a partner of CARE since 2003 in a variety of research - and programme implementation activities. They are currently partner in the Umwizero programme and have led initiatives around rights of women, the "confusion" between cultural practices and legal frameworks and women's rights, as well as the sensitive subject of women's inheritance.

**Radio Publique African**

African Public Radio was one of the first private radio stations created in Burundi. They are mostly known for their efforts to bring Tutsi and Hutu together and to be the voice of the people. They speak out against corruption and poor governance and have won several awards for their freedom of speech and courage. They have a national station and also a relay station in Ngozi where the Umwizero programme operates. In the current programme they have developed a weekly radio programme with the women members of solidarity groups and this is used to communicate between the groups, but also as an educational tool.

**ANSS**

ANSS is the first national association created for people living with HIV and AIDS. They have extensive social support groups and networks that address the social and medical needs of their members. They will be a new partner in this programme so that we can meet the needs of the people living with HIV and AIDS that are identified through the work of ABUBEF.

**Dushirehamwe**

This organisation started as a project that was supported by 3 international structures in 1996; UNIFEM, International Alert and Search for Common Ground. They were officially registered in 2002. Dushirehamwe is a collective of 250 grassroots women's organisations located throughout Burundi aiming to support communities, in particular women, to contribute to maintenance of peace, social transformation and defence of human rights for all. Their main activities are focused around training in conflict resolution, the UNSCR 1325, advocacy, research on customs that discriminate against women and creating opportunities for debates amongst political leaders and grassroots

associations. Dushirehamwe was instrumental in obtaining observer status for women's networks in the Arusha Peace negotiations and is currently active in supporting newly elected officials and linking them with grassroots organisations. Dushirehamwe is a partner in CARE's Kirumara programme and provides technical support in training on gender, UNSCR 1325, CEDAW as well as leading advocacy initiatives.

### **Tubiyage**

Tubiyage which means "lets talk" in Kirundi is a well established interactive theatre group that uses a variety of methodologies to create spaces for community members to discuss sensitive subjects and create opportunities for communities to develop solutions. CARE has worked with Tubiyage for 5 years in programmes addressing conflict resolution, sexual violence, HIV and AIDS prevention, corruption and governance. The organisation has several branches throughout the country that are decentralised by nature and coordinated by a central unit in Bujumbura. Tubiyage has also provided technical support to similar theatre groups in DR Congo and Rwanda. Tubiyage has however had limited organisational capacity and as a result CARE is providing organisational capacity strengthening through the Dutch funded PACDEV programme. In this programme, Tubiyage will be contracted to conduct theatre presentations supported by programme partners around subjects where dialogue is limited and reserved and as a result communities are faced with difficulties in resolving problems. Themes might include sexual violence, women's role in decision making, as well as women's rights.

Collaboration with Dushirehamwe, ANSS and Tubiyage will enter into force in 2010 (the second year of the program)<sup>34</sup>.

### ***I) Contribution to Civil Society***

#### ***An analysis of how the programme contributes to strengthening civil society***

One positive development in Burundi over the past decade has been the emergence of a more vibrant civil society, consisting of human rights groups, dynamic youth and women organizations, active church institutions, a highly active and brave private media and grassroots non-governmental organizations focused on reconciliation and community development. Slowly but surely, a more participatory, bottom-up political ethic is taking root in what has, historically, been an authoritarian political system. The programme will further contribute to this by:

Working with the *Solidarity Groups*: The Nawe Nuze is an approach for empowerment of local communities. Group members and programme partners benefit from trainings in the *Nawe Nuze* methodology (themes include: associative life, mode and functioning of groups, leadership and management, elaboration of policies/statutes/procedures, prevention and resolution of conflicts, savings and loan, management of income generating activities, networking, negotiation/advocacy, M&E)<sup>35</sup>. Members are also sensitized on their rights, and trained in advocacy in order to be able to hold local administrative authorities accountable. Moreover, the groups become fora for discussions around members' daily concerns; and fora for building of members' self-esteem and mutual trust. The Nawe Nuze approach is thus considered to contribute to strengthening the informal part of the local civil society.

Working with *local/national NGOs* as programme partners, and thus strengthening their competence and capacity (see also 2.2g).

Linking *grassroots women* to national networks advocating from women's empowerment and gender equality; such as Dushirehamwe and other national network that CARE collaborates with (see. 2.2.g).

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<sup>34</sup> Dushirehamwe and ANSS are however both strategic partners of CARE in Burundi and have therefore been part in the design process of this program.

<sup>35</sup> See also point 1.2. i.

***J) Women’s right, Equality, and the Environment***

***A description of how women’s rights and equality and climate and environmental concerns are attended to in the programme***

See Part 1.2.N for a general response to this question.

***K) Sustainability***

***Plans for phasing out the programme and ensuring sustainability (after the agreement period)***

The programme is based on the Nawe Nuze Solidarity Groups that will be operating independently after a period of about 10 month’s training. The premise is that we are creating a movement and through the Community Animators they will continue to create solidarity groups that will move beyond the life of the programme<sup>36</sup>.

The other components of the programme will be operated by national partners. The basic philosophy is not to create a sense of dependency with the target group. However, in the present context of Burundi, it is not to be expected that all support services provided by the partners can be sustainable without external help, but the partners also have other donors, and the programme does contribute to their core activities. Furthermore, the substantial capacity building of partners will help them become more independent. However, there is need for the government to start fulfilling its responsibility of also providing some of the basic knowledge and social services that national partners currently are providing, such as education on reproductive health, literacy, human rights etc.

The programme has an active learning component and will conduct 6 monthly coordination meetings by the steering committee as well as evaluations and other studies as necessary. The learning from these studies will be integrated into on-going implementation.

If the programme reaches its goals and objectives it is envisioned that current activities will not be needed in the same geographical area but perhaps other activities for advanced groups on governance and more sophisticated advocacy work. In addition it is viewed that if successful the programme should expand and cover new geographical areas.

***L) Total budget***

All of CARE Burundi’s programme fall into three thematic programmatic areas: Empowerment of Women, Youth and the Marginalised. This programme will fall under the women’s empowerment programmatic area. Although the Umwizero programme at the start-up will be entirely funded by Norad, it can later be combined with other components, funded through other CARE programmes, as they present themselves in the future. The programme has a specific time frame of 5 years, but contributes to a longer term overall programme goal.

The budget below presents the total programme budget:

<b>BURUNDI</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	5 808	5 808	5 808	5 808	5 808
CARE Norway (matching funds)	598	598	598	598	598
To be secured	1 329	5 958	6 006	5 708	5 185

<sup>36</sup> See also 1.2.i.

**CARE – Norad multi-year plan 2009 – 2013**

Total programme	7 735	12 364	12 412	12 114	11 591
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**III- PROGRAMME PLANS FOR CARE KENYA<sup>37</sup>**  
**Bondo/Siaya Household Livelihood Security [Lok Pachi] Project**

## **2.1 Situation Analysis**

### *An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

The democratization process in the political framework in Kenya was laudable until end of December 2007 when the post-election violence made the political environment very volatile. For a spell of two months the politically triggered violence rocked Kenya, a situation that caused internal displacement of many citizens in to the temporary IDPs' camps. The violence led to the internal displacement of about 300,000 people most of who settled in temporary IDP camps while others, especially those who had come from Western Kenya, opted to return to their ancestral homes. Western Kenya in particular has had a large population of Returnees that comprise mainly of widowed women whose husbands were killed during the post-election violence, old people, and children of ages ranging from below one to about 16 years. Following the signing of Peace Deal between the political leaders, Kenyans are optimistic that the 10th Parliament, which has 18 women MPs [the highest in Kenya since independence], will steer the Country into peaceful recovery and reconstruction despite the effects of the post-election violence. After this short lived violence, the political situation in Kenya has returned to a calm and stable state making the environment conducive for the implementation of development activities.

The incidence of poverty in Kenya varies from one area to another and from rural to urban areas. In 1997, it was estimated that 75-80% of the poor live in the rural areas, with the majority located within the highly populated belt stretching south to the southeast region from Lake Victoria to the Coast. The worst instances of poverty are in the Coast, Eastern and Nyanza Provinces, where the Lok Pachi Household Livelihood & Security Project has been implemented since 2005. In the rural areas, food poverty is estimated at 51% while absolute poverty is 53%, while in urban areas, this is estimated at 38% while the absolute poverty is 49%. The overall national incidence of poverty stood at 52% in 1997 and had increased to 60% in 2004.

The Lok Pachi Project is being implemented in Bondo and Siaya Districts within the Nyanza Province. Both Districts share a common boundary, have similar physical features and livelihood systems, and are among the worst affected districts in terms of poverty and HIV and AIDS. The Lok Pachi project aims to contribute towards the economic empowerment of women living in these districts. The project is in line with the Kenyan government's key strategic policies on poverty reduction and the National AIDS Strategic Plan which has the socio-economic empowerment of citizens as an overarching goal to reduce the HIV and AIDS epidemic and poverty.

Since January 2005, to-date the Lok Pachi Project's core implementation strategy remained to be Voluntary Saving and Loan (VSL) methodology for the socio-economic empowerment and HIV and AIDS awareness of the target group. CARE has continued to explore innovative gender mainstreaming strategies that include spontaneous gender debates and discussions around retrogressive cultural norms, GBV as well as HIV and AIDS. This application seeks to enhance programme continuity for one more year to December 2009 under the programme agreement with Norad and will seek to strengthen the quality of the project achievements obtained over the past five-years.

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<sup>37</sup> Kenya is only applying for funds for one year, the last one of the project "Lok Pachi – Change Your Attitude programme". CARE Norway's cooperation with CARE Kenya will cease after 2009.

While most of the components have remained relatively the same, the project has improved on the gender component to address the concerns that emerged from the project Mid-Term Review that was conducted towards the end of 2007 and the impact of post-election violence on women and girls. The post election violence resulted in cases of sexual and gender based violence with the effects still fresh among the victims, a majority of whom were IDPs. The project will support activities geared at mitigating the effects of GBV on the victims as well as sensitizing the community on the effects of GBV.

## **2.2 Programme Presentation**

### ***A) Development Goal***

**Development goal:** Women in Kenya are socially and economically empowered.

Poverty in Kenya has many facets that can vary substantially across space, time, and various socio-economic groups. Kenya faces serious challenges in terms of human and economic development. As is a typical feature in many poor countries, women are the worse victims of the lack of economic and political power, which in turn undermines the nation's effort to achieve development. CARE Kenya has identified economic poverty among women as one of the underlying causes of low development in the country, and therefore, through this project, will work to socially and politically empower women.

### ***B) Programme Goal***

**Programme goal:** 25 000 people, particularly women, in Bondo and Siaya districts have sustainable household livelihood security.

- i. % women reporting an improvement in their economic capacity
- ii. % women with control over assets in the household.
- iii. Change in reported levels of expressions of various forms of stigma.
- iv. Change in behaviour and attitude concerning HIV and AIDS

The dimensions and underlying causes of poverty are often complex, interrelated and context-specific. However, in Bondo and Siaya Districts where the Lok Pachi Project is implemented the main causes have been identified to be high impact of the HIV pandemic on people within the productive age range. In the project target location there is limited access to financial resources, limited economic opportunities and very low skills with regards to HIV and AIDS.

HIV prevalence rates in Bondo and Siaya are 23.6% and 24%, respectively, as compared to the national figure of 7.4%. Furthermore the two Districts have a high poverty incidence of 65 % coupled with highly punctuated gender imbalances and biases. These situation forces women to bear the burden of ill-health coupled with limited resource ownership putting them at a much worse position as compared to the rest of the society. In order to change this situation, CARE Kenya aims to empower women using microfinance institutions, raising HIV awareness, and the provision of referral to appropriate health services.

The revised and upgraded Household Livelihood Security [Lok Pachi] project in Bondo and Siaya Districts will continue to employ the strategies that would enhance socio-economic capacities of the project participants and the communities to cope with effects of HIV pandemic; provide accurate information on HIV and creation of sustainable supportive linkages that goes beyond awareness and establishing strategic partnerships with CSOs, Community Resource Persons [CRPs] for expanded outreach activities and technical sustainability.

**The following strategies will remain in use in the implementation of the Lok Pachi Project**

**Voluntary Savings and Loaning [VSL] Methodology:** Strengthening the economic capacity of the target communities as a mitigation to cope with the effects of HIV pandemic and thus reduce its impact through the introduction of group savings mobilization methodology to improve the access to credit and income sources of the resource poor and vulnerable communities.

**Public Education on HIV and AIDS:** outreach public education, thematic debates and discussions on HIV and AIDS and gender among the savings and lending group members will be facilitated. This will involve provision of accurate information on HIV prevention and stigma reduction. Enhanced integration of sexual and gender based violence education and response activities as well as mainstreaming in the economic and HIV interventions will be carried out.

**Strengthening institutional capacities:** local strategic and complementary partnership will be facilitated including sustainable linkages and networks for and among the project participants and their communities. This will include relevant government line ministries, local CSOs and the community participants in the provision of services to different vulnerable groups.

### *C) Target group*

The Project will work in Bondo and Siaya Districts of Nyanza Province. The two adjacent Districts have vast pockets of poor people and high prevalence and effects of HIV and hence the choice and selection of the beneficiary population is based on their vulnerable situation. The project is expected to work with 5 000 [up to 70% women] direct participants and their communities and 25 000<sup>38</sup> persons indirectly. The project especially targets women for economic empowerment as a mitigation strategy against the socio-economic effects of the HIV pandemic. CARE will work on the reduction of stigma and discriminatory attitudes towards women and people living with HIV and AIDS. The project will carry out socio-economic empowerment activities using the savings and loans methodology. The main beneficiaries of the Lok Pachi project include widows, people living with HIV and AIDS, community members at risk of contracting HIV such as people involved in the fish industry along the beaches of Lake Victoria, female orphans and vulnerable children that head households, and GBV survivors.

### *D) Expected results*

**Expected Outcome 1:** The economic capacity of the targeted group has increased

- i. % of group members reporting an increased income
- ii. % of women experiencing an increase in access and control of productive assets
- iii. % increase in the level of savings at the household level

#### **Expected outputs:**

1. VSL group members have an increased savings & credit portfolio
  - i. # of individuals participating in VSL groups
  - ii. # of VSL groups formed and operational
  - iii. Cumulative savings portfolio since project inception
2. VSL group members have access to credit of up to 725,333 NOK from the group funds
  - i. Amount of loan taken by VSL members
  - ii. Types of purposes/ activities credit is invested in
3. VSL group members are equipped with relevant skills to benefit from obtained credit
  - i. # of individuals trained in selection, planning and management (SPM)
  - ii. # of VSL members engaged in profitable income generating activities

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<sup>38</sup> The average size of the household is 5 members

- iii. X % of members are producing marketable products

**Expected Outcome 2:** The VSL group members and their communities have attained increased awareness regarding HIV and AIDS, and GBV issues

- i. % increase in reported levels of knowledge on HIV and AIDS, GBV and support services
- ii. # PLWHAs and GBV survivors that report reduced stigmatization from their communities

**Expected outputs:**

- 1. VSL group members have increased information on HIV and AIDS concerns
  - i. # of individuals trained on selected HIV and AIDS related issues
  - ii. # of HIV and AIDS outreach activities conducted
- 2. VSL group members are provided and referred for care and support services
  - i. # of individuals referred to HIV and GBV support services
  - ii. # of group therapy conducted for GBV survivors

***E) Anticipated Risks***

***An assessment of anticipated risks and how these may be countered***

The project team envisions resistance by some community members to women's empowerment due to the strong inherent traditional customs regarding women's position and role in the community. The project will involve men to initiate change and engage the community to support women's empowerment. CARE will design a validation process of the risks that will be identified by closely engaging with the Savings and Loaning groups in focused group discussions. These will assist in helping the project team identify measures to reduce the risks.

***F) Relevance to Donors and Recipient Countries***

***An analysis of the relationship to other donors, recipient authorities and their official plans and goals***

The Lok Pachi project through its focus on economic empowerment, directly contributes to the Kenyan government's key strategic policies on poverty reduction. The project is contributing to wealth creation at the rural grassroots level where the majority of the Kenyan population live. The project further contributes to the National AIDS Strategic Plan which has the socio-economic empowerment of citizens as an overarching goal to reduce the HIV and AIDS epidemic and poverty. The mid-term review found that the project is employing strategies that are in line with Millennium Development Goals on the reduction of extreme hunger and poverty, and combating HIV/AIDS.

CARE Kenya works closely with various Government Ministries/Departments that address different aspects of the Lok Pachi Project. This project shall closely work in partnership with key line Ministries such as the Ministry of Health, Gender, Culture and Social Services and the Ministry of State through the Local Provincial Administration at all levels of its implementation.

The project is not carried out in cooperation with other donors but the European Community is a key funder and strategic partner for CARE Kenya's other country poverty reduction programmes.

***G) Grant Recipient's Added Value***

***An assessment of the Grant Recipient's contributions to local partners other than financial assistance – in other words what is the added value of the Grant Recipient***

CARE provides training on microfinance methodology and facilitates the establishment of savings and loan groups. CARE also provides training on HIV and AIDS awareness and basic literacy and numeracy skills. Established saving and loan group groups decide what sort of training programmes they are interested to attend. To combat gender based violence, GBV, CARE also provides training on GBV and human rights. CARE also establishes partnership with, and training for, local civil society in order to ensure that the savings and loan groups and the HIV and AIDS awareness work will continue also after CARE's involvement with the project is finished. CARE undertakes institutional capacity building of project partners in terms of technical and organization development aspects through training, mentoring and coaching, arranging cross-learning visits, and the creation of networks for sustained diversified services and support systems.

CARE is at the moment working on leaving the individual project approach behind and will in the future be adopting a programme approach.

#### ***H) Local Partner Organizations***

##### ***An analysis of whom the local partner organisations represent and their role/strengths in civil society***

The socio-political environment in Kenya has affected full participation of CSOs in developmental activities. This has been manifested through non-involvement of CSOs in policy formulation and decision making process on issues that affect the community. This may be attributed to centralized structures that do not allow for participation of children, families, communities and local organizations in development activities, which has further contributed to underdevelopment and increased poverty in most rural communities in Kenya. Siaya and Bondo district have an array of civil society organizations involved in diversified community development activities. Civil Society Organizations face numerous challenges in their development agenda that include weak institutional capacities in terms of leadership and governance, inadequate technical programmatic capacities and poor coordination and networking. Through concerted effort from the government of Kenya, and development partners, decentralization of core developmental activities and decision-making process are underway. The Loki Pachi project will endeavour to strengthen capacities of CSOs and linkages with sector stakeholders, including the government at district and national levels to address fundamental underlying causes of poverty in the project locations. The project will actively involve community members and institutions in implementation of the proposed project activities as alluded to by the government of Kenya's current policy of devolution of power to local structures

The project will continue to use partnership as one of the implementation strategies at three-tiers: [a] Partnership with Community Resource Persons [CRPs] [b] Partnership with the Civil Society Organizations [CSOs] and [c] Complementary partnership with other organizations, especially those in HIV programme areas. Through this partnership, the project intends to reach more direct participants with a minimal cost while at the same time building local structures and linkages for sustainability. Their roles are further elaborated below:

**Community Resource Persons [CRPs]:** they are mandated with mentoring and coaching of mature VSL groups, training and sensitization of prospective project participants thereby providing technical back-up in liaison with the project staff. The value of CRPs is that they have strengths in their ability to fit the training time and day that is convenient to them since they operate within their own communities.

**Civil Society Organizations [Community-based CSOs]:** Will mostly implement HIV and AIDS awareness activities using Participatory Education Theatre [PET] and folk media. As part of the project sustainability and phase out plan, the project will document gaps, challenges and best practices/lesson learnt from the CSOs activities. This will be used for capacity strengthening of the CSOs through mentoring, coaching and exchanges visits. In addition, the project will make efforts to

tap talents of the project participants especially the youth for further development as means of sustaining CSO activities in the target communities.

### ***I) Contribution to Civil Society***

#### ***An analysis of how the programme contributes to strengthening civil society***

As part of the on-going technical and financial institutional capacity strengthening activity, CBO's implement the planned project activities and utilize recap sessions to mentor and coach project implementation and financial management. Participating CBO's acquire and develop their professional skills and could also use their skills to train others in their communities. The project plans to strengthen the capacities of all the partner organizations on resource mobilization skills, in order for all of them to be able to continue their work after the Norad funded project ends. This will be done through facilitating access to government funding and creating linkages with other donors. The project also works in complementary partnership with 15 organizations that includes international NGO's such as Action Aid Kenya, and local NGO's such as Ace Communications.

The Lok Pachi Project, through the gender mainstreaming approach, has created an opportunity for increased active participation of women in development, social activities and to some extent also various levels of decision-making in their communities. It has also enhanced women's economic security through their accesses to loans via the savings and loan groups.

### ***J) Women's right, Equality, and the Environment***

#### ***A description of how women's rights and equality and climate and environmental concerns are attended to in the programme***

The mid term review of the project in 2007 found that the women were economically empowered through their participation in the savings and loan groups. The access to credit has improved the economic conditions within the family, and had tremendously improved the participants' living standards. The communities increased ability to pay school fees, initiate businesses, repay loans, and talk about the HIV status, reflects both the economic change and the behavioural change. There was also enhanced nutrition in terms of the number and quality of the meals a household were able to serve per day as a result of the improved economic condition for the savings and loan group participants. The economic empowerment of the women has also led to an increased social status of women within the family and within the community. Furthermore, women report that they are in a better position to make informed choices about their sexual health and rights, and that they therefore were in a better position to lower incidences of economic related sexual relationships and HIV infections. The feeling of empowerment among women has enhanced their confidence to take leadership positions at the community level. According to CARE's mid term review of the Lok Pachi project women leadership is becoming more recognized and accepted by the wider community as a result of the project.

VSL groups also serve as forums for awareness raising on HIV and AIDS, and women's empowerment related debates and discussions.

Gender based violence is a problem in the target areas. CARE attempts to combat gender based violence by addressing this in VSL meetings. By addressing this issue in the village based meetings CARE hopes to raise awareness among the participants on basic human rights and the fact that gender based violence is counterproductive and. See also 1.2N.

### ***K) Sustainability***

***Plans for phasing out the programme and ensuring sustainability (after the agreement period)***

The Lok Pachi project will enhance sustainability initiatives during its final year of implementation with a focus to strengthening institutional capacities of already established community structures. In addition, the project will strengthen partnership and linkages with Government departments and existing stakeholders in the project locations. Active participation by community members in project activities and capacity building of local indigenous organizations including the communities own resource persons will form part of the phase out strategy. The following section highlights specific activities in each of the component that is geared towards project continuity. The activities are mostly informed by the findings from the Mid Term Review that identified strength, gaps and challenges upon which the project exit would be planned for. Specifically:

- Economic empowerment Component

**Enhance capacities of project participants in business skills:** The project will train project participants on entrepreneurial skills to effectively run and manage viable IGAs. The project will train community members as enterprise-based ToTs who will directly work with the project participants along the project team. The project will liaise with CARE Kenya’s CASH Sector in linking up the IGAs to easily accessible markets and networks within the project location. This would ensure sustained income flow to the members participating in IGAs.

**Facilitate formation of VSL cluster groups:** the project will facilitate formation of VSL cluster/Village Savings and Loaning Systems that will consist of mature and cohesive VSL groups. The clusters will have a central management unit that will offer management and leadership to the groups. This will be a pilot strategy and by the end of 2009 the project plans to have established 3 VSL cluster-based groups. The project will apply best practices and lessons learned from CARE Niger’s MMD groups.

- HIV and AIDS Component

**Building/strengthening capacities of project partners:** the project will strengthen the existing strategic partnerships with CSOs and Government departments as well as build new partnership with local indigenous organizations. This partnership will enhance access to HIV prevention, care and treatment services in addition to influencing behaviour changes among vulnerable communities. The project will strengthen technical capacities of Participatory Education Theatre (PET) based partner CSOs that will include fundraising skills with the aim of ensuring sustained self financing of PET activities.

***L) Total budget***

The budget below presents the total programme budget. The budget has only a figure for one year because this is the fifth, and last year of the project.

<b>KENYA</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	2 421	0	0	0	0
CARE Norway (matching funds)	249	0	0	0	0
To be secured	258	0	0	0	0
<b>Total programme</b>	<b>2 928</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**IV- PROGRAMME PLANS FOR CARE MALI**  
**Empowering Women and Girls: A local response**

**2.1 Situation Analysis**

*An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

Since 1991, Mali has embarked on a democratic process, and has since experienced sustained economic development. In 1999, democratic local elections were organised and decentralization policies introduced. The decentralisation process gave hope to the populations and encouraged them to play a role in local development. According to the general review report of the PRSP 2002-2006, Malian economy has achieved an average annual growth of 4,9% from 2002 to 2006. Mortality rates have been declining, resulting in a 0,3% year increase in life expectancy. The rate of populations' access to drinking water increased from 65,8% in 2004 to 67% in 2006 and cereal production has increased by 9% compared to the 2005-2006 crop season.

However, this significant progress at the macro level hides many disparities and Mali still finds itself among countries at the bottom of the UNDP HDI list, nr. 173 of 177 (UNDP 2008). According to the Poverty Assessment Survey conducted in Mali in 2001, over 64% of Malians live below the poverty line; about a quarter live in extreme poverty. In Mopti, particularly the Dogon country, 80% of households are food insecure, which ranks it as the most food insecure region. The infant and maternal mortality rates are among the highest in the world. In addition, according to the 2006 DHS, several constraints limit the use of modern health care, and they include the lack of health facilities and households' weak financial resources.

Regarding literacy, less than a quarter (21%) of the adult population in Mali can read and write (EMEP 2001) and there are significant gaps between men and women (barely 12% of Malian women can read and write). The levels of education are relatively low. The regions of Timbuktu, Mopti and neighbouring Segou have the lowest rates of child enrolment in primary school in the country. Gross enrolment rates in primary school in 2004 -2005 for Timbuktu (44,5%-girls, 53,7%-boys), Mopti (38,1% girls, 43,1% boys) and Segou (49,3% girls, 64,1% boys).

A key to the livelihood security and economic development of rural households is access to financial services. According to a study conducted by the World Food Programme (WFP 2006), 41% of households in Mali do not have access to any form of credit. The regions of Timbuktu and Mopti are those where households stated they have less access to credit, with nearly 63% of the households which do not have access to any form of credit or any other financial service. Although there are microfinance institutions, conditions for access are not always favourable to most vulnerable groups.

The Malian Government's Growth and Poverty Reduction Strategic Paper (GPRSP/CSCR) focuses on the development of infrastructures and productive sector; structural reforms; and strengthening of the social sector. However, if access of the most vulnerable groups and equitable distribution of services and resources are not specifically taken into account, this strategy could disadvantage the most vulnerable women and girls.

Widowed or divorced women are the most threatened in terms of inequity of access to production assets, to information, and to awareness of their rights and access to alternative income generating activities; access to education and training; access to health, and in particular to reproductive health; access to formal organizations and to elective positions. The inequalities that they are confronted with are a major cause of poverty taking into account their role and responsibilities with regard to social reproduction, education, behaviours, health, etc.

Studies conducted by CARE Mali in 2002 in the regions of Timbuktu, Mopti and Segou, indicate that the households led by women, seasonal farm workers and girl mothers are among the most vulnerable groups in the society.<sup>39</sup> The studies also indicate women's low level of representation in decision-making bodies in commune, and village-level organisations (the communes have 703 women councillors out of 10 765 elected officials). Moreover, perceptions are usually not favourable to women's participation in public life as shown by the results of a study conducted by CARE Mali in rural and urban areas in Segou region.<sup>40</sup>

Poverty assessment in Mali under the unifying framework<sup>41</sup> reveals that three dimensions (human conditions, social standing and favourable environment) are closely related and that deep inequalities illustrate poverty among Malian women. Discriminations they suffer from are quite obvious in terms of incomes, workload, social condition, education, participation, risks related to reproductive health, participation in social and political life for various political reasons and religious and cultural pressures. Some revealing points are:

- Despite every citizen's right to health recognized in the Malian Constitution's, 36% of Malian women had not received any antenatal care in 2006 because of constraints like illiteracy, husbands having to give permission or the high cost of good services and drugs,
- Early marriages, polygamy, marriage succession, levirate and sororate marriage, frequent and closer pregnancies, excision and other violence result in a greater vulnerability to STI and HIV and AIDS seroprevalence rate among women aged 15 to 49 years is estimated at 1.5% and is higher than that observed among men of the same age group (1.0%). This is mostly due to the persistence of some cultural and social practices, and a nutritional precariousness especially for those who are in reproductive age (43% of the women suffer from anaemia)<sup>42</sup>.
- The constitution of Mali's third Republic passed in 1992 guarantees the same rights to men and women without regards to sex, but the National Assembly of Mali has only 15 women deputies (including 6 from Ségou; 2 from Mopti and none from Timbuktu) out 147 (i.e. approximately 10%); 6 of the 75 elected officials of the High Council of the Local Communities are women. Out of the 704 mayors of the country, i.e. less than 1% are women and so are only 6,6% of 10,774 elected officials. The Malian cabinet has 6 women out of 26 ministries.

The Malian Government has ratified CEDAW, but there are still many challenges related to cultural practices that block gender equality. A new family law aims to redefine children's rights within families and bring more equality between men and women in relation to marital status, parental rights and property ownership. The new law code is waiting to be adopted by Parliament but is facing opposition from some Islamic groups who claim it goes against Islamic principles, particularly when it comes to proposed changes to the country's marriage laws.

## 2.2 Programme Presentation

### *A) Development Goal*

**Development goal:** The Empowering Women and Girls programme aims at reducing structural poverty in Mali through a set of actions and initiatives which will improve the livelihood of the most vulnerable and/or marginalised girls.

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<sup>39</sup> Household Vulnerability and Livelihood Assessment by CARE International Mali. 2002

<sup>40</sup> "Women's participation in public life in the region of Segou: Case study of the city of Segou and the villages of Diombougouba and Oula (district of Macina)", CARE International Mali.

<sup>41</sup> The Unifying framework is a poverty assessment framework designed by CARE which helps to classify and/or categorize the causes of poverty as immediate, intermediary and root causes and depending on whether or not they are linked to human condition, social status or a suitable environment.

<sup>42</sup> Demographic and Health Survey, 2006.

This contribution is planned over a period of seven years (2009-2015) and fits into a broader vision corresponding to the acceleration of the achievement of the Millennium Development Goals and of its implementation frameworks in Mali. This falls in under the goal of CARE Mali's strategic plan 2008-2015: In 2015, 750 000<sup>43</sup> women and girls in Mali will have increased their economic, social, political and cultural power in order to enjoy their rights and to assume their responsibilities.

In terms of the MDG, the programme seeks to contribute to Reducing Extreme Poverty and Hunger (MDG 1), Promoting Equality and Women's Autonomy (MDG 3), and Improving Maternal Health (MDG 5).

### ***B) Programme Goal***

**Programme goal:** By 2015, vulnerable and marginalized women and girls of the Mopti, Segou and Timbuktu regions will have improved their social status and increased their economic and political powers required for them to move out of poverty.

- i. # of women who report being autonomous in the choices and decisions that affect the quality and security of their livelihood,
- ii. an increase of illiterate women who have access to quality reproductive health care,
- iii. # of standards, policies and laws that have changed in favour of women's rights.

### ***C) Target group***

The primary impact group of the "***Empowering Women and Girls***" Programme comprises households led by women, seasonal female farm workers, and unmarried mothers. These households include women and men, young people and children from various ethnic groups living permanently or temporarily in the implementation areas. The number of these beneficiaries will evolve following the development of the programme over the years.

According to the statistical yearbook of Mali 2006, women and girls from 15 to 49 years represent 21% of the total population. Given that the population of the 75 communes is estimated to 1 203 140, the total number of persons who will be affected by the Programme over the seven years is estimated to be 250 000 girls and women (age 15- 49). At least 50% of these people (that is to say 125,000) will belong to the priority impact group (categories considered as most vulnerable). Although the Programme will work with the whole population of its implementation areas, its effects and impacts will be measured against the following vulnerable groups and categories:

*Women as heads of household, widows and divorced women:* Studies of vulnerabilities conducted by CARE in 2002 in the three regions indicate that households led by women are more vulnerable than those lead by men (88.7% against 48%, respectively). Over 10% of the households (those surveyed in the Region of Timbuktu) are headed by women. Almost 90% of these households are very vulnerable. Over 70% of women heads of household are widowed and over 15% are divorced. The main activities of these women heads of households are small trade, manual work and housework.

*Seasonal female farm workers* are extremely poor and/or marginalized. The female farm workers have only their labour force as a production asset. They are daily confronted with the low level of income and the precariousness of the work from which they live and hardly manage to accumulate capital. Because of their weak organizational capacity, the demographic diversity and their weak capacity of

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<sup>43</sup> According to Mali statistical year book, in 2006, the total population of CARE Mali's three regions of intervention was 4 460 000, girls and women from 0 through 49 years represent 45% of the population i.e 2 007 000. CARE aims more than 37% (750 000) of girls and women from 0 through 49 years old in its intervention regions. This constitutes an important crowd to produce impacts in a considerable scale.

individual management, access to formal sources of credit is difficult for them. Questions related to land could be the main issues for advocacy activities for them.

*Unmarried mothers (<18)*: Because of the influence of Islam, customs, and the strong hierarchical organization of the Malian society, the unmarried mother is excluded from all social systems. In most cases, those who can no longer stand stigmatization move to cities to work as housemaids, street vendors, or prostitutes. These girls are not sufficiently prepared for urban life to be able to defend their rights.

Secondary beneficiaries are *permanent or temporary residents* in the implementation areas of the Programme, and their local social networks whether they are formalized or not. Their number can be estimated to be equal to that of the inhabitants of the 75 implementation communes, that is to say approximately 1 203 140.

*Mixed organizations*, made up of representatives of the civil society and the Government or its local representations will be also supported by the programme under the overall strengthening of civil society. Local communities and community leaders are key actors of the programme and will be at the same time partners and beneficiaries.

#### **D) Expected results**

##### **Expected outcome 1:**

By 2015, 100 000 vulnerable and/or marginalized women of the regions of Mopti, Segou and Timbuktu are engaged in viable economic activities and have secured their means of production.

- i. # of women and girls with an income above the economic poverty line/threshold (\$ 2/day)
- ii. # of women who control their own production assets
- iii. % of economic activities that can self fund and generate profits.

##### **Expected outputs:**

1. Members of 200MJT networks can access credit.
  - i.# of functional MJT networks
2. Members of 200 MJT networks access public investments and production assets for their members.
  - i. # of investments realised by or for MJT networks
3. Women establish, own and manage at least 200 businesses.
  - i. # of businesses created and managed well

##### **Expected outcome 2:**

In 2015, 25 000 girls (15 to 19 years old) of the regions of Timbuktu, Mopti and Segou have acquired socio-professional skills allowing them to take advantage of viable options for their future economic development.

- i. # of mothers girls engaged in socio-professional activities
- ii. Girls education gross rate compared to boys
- iii. Girls school attendance rate compared to boys

##### **Expected outputs:**

- 1) Girls can access formal and non-formal education in every partner commune.
  - i. # of forums on girls' education organised by MJT networks in collaboration with others
  - ii. % housemaids, members of MJT networks who attend formal school or vocational training
- 2) At least 12500 girl members of MJT are engaged in income generating activities.
  - i. # of young mothers who manage an economically profitable activity.

##### **Expected outcome 3:**

By 2015 Women organizations have increased their power of influence on decisions at regional and national levels

- i. % of elective positions of the collectivities and civil society filled by women and girls
- ii. # of collective actions led by alliance organizations of women and men in favour of gender equality

**Expected outputs:**

Women understand and participate in the electoral process in Mali

- i. % women and girls who received training in civic education, negotiation, social dialogue and advocacy
- ii. % of women candidates for local and legislative elections
- iii. % of women participation in voting during elections
- iv. % members of MJT networks participating in public debates on social inequalities

**Expected outcome 4:**

In 2015, local development actors of the region of Timbuktu, Mopti and Segou ensure the protection of the most vulnerable/marginalized.

- i. # of conflicts and/or crises managed by the communes in favour of the protection of the vulnerable groups, especially women and girls.
- ii. % of youth and adults in vulnerable households having improved their food security and especially the nutritional status of children < 5 years in their households.

**Expected Outputs:**

1) Local partner NGOs, commune officials and communities have skills for developing Emergency Preparedness plans (EPP)

- i. # of people trained in emergency early warning and conflict sensitivity

2) A crisis management plan is developed and implemented by each commune partner

- i. # of communes having developed and implemented crisis management plans.

3) Households of women and girls members of MJT networks have the skills and access to support to face conflicts and diverse crisis and restore their production means.

- i. # of households that have the capacity to resist to crises and conflict.
- ii. # of villages and CBOs that have the institutional capacity to implement strategies of promotion and rehabilitation of nutritional and food security, during and after crisis.

**Programme components**

The outcome results of the Programme will be achieved through six components which contribute together to the programme implementation rationale

**Component 1 - Women social-economic enterprises** - seeks more specifically to provide security for women's economy and production assets, in particular women heads of household, divorced women, seasonal farm workers and young mothers. It address the factors of women and girls poverty which are closely related to their economic activities, constantly exposed to various risks which must be taken into account to ensure a sustainability of actions. This component will also support the emergence of women's organisations and networks of business-oriented women whose activities will contribute directly to the achievement of outcome 1 and contribute indirectly to outcomes 3 and 4.

**Component 2 - Education and socio-professional integration of girls** - seeks to develop a vocational system of education for girls and in particular young unmarried mothers in view of their socio economic integration. This component contributes to outcome 2 and will also produce results that support outcome 1 and 3.

**Component 3 - Collective action of women and girls** - will address the under representation of women and girls in decision-making processes at local, regional and national levels. It will contribute

directly to the reduction of the prejudices to women and social inequalities while working with all the actors at the community, regional, and national levels thus to outcome 3 and indirectly to the three other outcomes.

**Component 4 - Crises and Conflict Mitigation and Management** - addresses the crucial problems of the mitigation and management of crises, conflicts and other risks affecting the security and cohesion of communities. Initially implemented only in Timbuktu region this component will be gradually expanded to the other regions in order to fully achieve outcome 4. The component aims specifically at consolidating a sustainable dynamics of social peace through concerted and negotiated management and prevention of risks of famine, malnutrition, community conflicts and pandemics. It includes a subcomponent Good Nutrition for Children Now in Bandiagara, Mopti, funded by EU from 2008 to 2011. This component and the subcomponent will contribute to outcome 4.

CARE and its partners will seek an extension of the experimental approach of this component to other communes covered by the programme in order to create an institutional and local capacity ensuring a better access to knowledge, power and required resources for the most vulnerable households to improve their food situation.

#### ***E) Anticipated Risks***

##### ***An assessment of anticipated risks and how these may be countered***

Like all Sahelian countries, Mali is constantly exposed to risks related to environmental changes as well as changes of development policies and strategies. Also, the dependence of the Country upon development assistance makes it even more vulnerable to external shocks. The main assumptions of risks which the Programme will try to track in order to minimize their negative impacts are:

- *External risks: The commitment and capacity of the Malian Government to maintain and improve the system of governance:* During the Programme implementation, communal elections will be held in 2009 and legislative and presidential elections in 2012. Although ever since 1992 Mali has had peaceful changes, it is worth noting that elections are always sources of tension and that a violent contestation of election results could quickly destabilize the country.
- *The socio-political instability of the West African sub-region is a threat to development programmes:* In Mali, like in the sub-region, there are conflicts almost everywhere related to good governance and to the natural resources management. As a matter of fact, one of the driving forces which could influence the future in terms of vulnerability, poverty, discrimination and rights, is the internal and external safety of Mali.
- *Climatic risks and natural disasters (drought, locusts' invasion)* remain the most probable assumption in a Sahelian country whose agricultural production depends to a large extent on rainfalls. Two consecutive years of drought or one year of severe drought such as the one in 1973 or 1984 would compromise efforts to improve the living conditions of households and would require emergency activities. Since 2002, CARE has developed an Emergency Preparedness Plan. This tool will enable CARE to put into place a mechanism of an early emergency response system and to plan activities to reduce impacts of an upcoming crisis with the concerned populations. The use of this approach with the population of the regions of Timbuktu further to the 2004-2005 food crises reduced the negative effects of the crisis on the population and on the projects and the programme of CARE in the region.
- *Internal risks- The cohesion and viability of the MJT groups and networks:* bad management of internal tensions, weak motivation or capacity for saving or immaturity of groups with regards to management of funds can also threaten the cohesion the MJT network. The approach used is focused on groups' governance and capacity to incorporate and meet equitably the needs of their

members (thematic training, transparency, social funds). The programme will also, monitor impact of any external fund (through MFIs or networks loans, grants, etc) on the MJTs and /or members of the MJT and on the viability and cohesion of the groups.

- *The willingness of men to respect women's rights* and to give them opportunity of participation: despite certain progress, resistance against the promotion of women's right is still strong and persistent. Promoting women's empowerment and challenging deep-rooted cultural norms and practices will inevitably stir protests and negative reactions from certain parts of society, particularly conservative men and women. By involving men and facilitate social dialogues on rights and duties, and through the MJT networks support the promotion of women in leading positions will allow to reduce constrains and contribute to a change in attitudes and mentalities.

Policies and selection criteria for public investments in collective initiatives do in principle enable women's action and entrepreneurship. The programme will use these principles to advocate for their equitable and transparent application. The capacity for outreach and the viability of MFIs will be an important factor for the success of women's enterprises. The MFI sector is expanding rapidly in Mali, and lots of MFIs are created with unacceptable financial performance and /or with limited innovation and skills. The performance of each IMF will be analyzed with appropriate tools (ratings) in order to reduce risks for the programme beneficiaries.

#### ***F) Relevance to Donors and Recipient Countries***

##### ***An analysis of the relationship to other donors, recipient authorities and their official plans and goals***

The programme will work in conjunction with the technical departments of the Government in charge women and girls at the regional (Regional Directorates for the Promotion of Women, Children and Family) and national levels (Ministry for the Promotion of Women, Children and Family) for the discussion of strategies and priorities and sharing of information and data. Representatives from the technical departments of the government participated in the design process of the programme, along with representatives from local NGOs and the primary impact groups.

Synergy is a strategic approach for CARE Mali which decided in 2000 to focus on coherent and integrated projects/programmes with planned coordination and overall performance measurement system of programmes at the regional level. The purpose of this approach is to ensure that these projects and programmes will have synergistic impacts between themselves on the one hand and with other projects or programmes intervening in the same region on the other hand, creating greater impact at a lower cost and efficiently addressing the practical and strategic needs of most vulnerable and marginalized populations in Mali.

The programme approach stresses synergy within CARE Mali and with other agencies such as UNICEF on children's education, advocacy, and APEJ (Agency for the Promotion of Employment) on resource mobilization and the funding of youth initiatives, support for technical training, the identification and training of teachers, Teaching Academies on literacy training, the identification of potential trainers and monitoring and evaluation of trainings (pedagogy), public health services on awareness raising sessions and development of tools to fight female genital mutilations on girls, etc.

In 4 communes of Mopti region, the "Good Nutrition for the Children Now" Project, funded by the European Union, aims at reinforcing the nutritional security of women in reproductive age and children under five years. The programme will integrate the actions of this project with the aim to expand them to other communes over the next six years in coherence with the problems experienced by women and children.

In addition to the three projects funded by Norway (PAICOL, ROCAM, PACOB) which are closing out in December 2008, and the Nutrition project, CARE Mali is currently implementing a five-year nationwide health programme (Kènèya Ciwara) in the regions of Ségou, Mopti and Timbuktu funded by USAID, an education programme in the region of Mopti which has two components: fighting child trafficking and labour through basic education and Development Education for Girls Empowerment (DEGE), a Food Security Project through the Promotion of Irrigation (SAPI) funded by the Netherlands, and a Wells for Peace in Timbuktu funded by the European Union. All these programmes and projects target directly or indirectly women or girls.

The programme will support the creation of a coordination and exchange forum for Women's and girls' empowerment at district and regional levels. These will be used as avenues for sharing and learning and capitalize on each others' experience.

### ***G) Grant Recipient's Added Value***

#### ***An assessment of the Grant Recipient's contributions to local partners other than financial assistance – in other words what is the added value of the Grant Recipient***

CARE Mali has over 30 years of presence in Mali and has considerable experience on the ground. In the 1990s, CARE Mali shifted from a direct service providing strategy to an approach of partnership with the national NGOs to reinforce its contribution to the development of Malian civil society. The partnership proposed under this Programme is based on experiences cumulated for over ten years of partnership with the Malian NGOs. The major innovations introduced by CARE Mali include among others:

- Adoption of *unified framework for the analysis and design of Household Livelihood Security, Gender Equity and Diversity and Rights Based approaches* which made it possible to better understand and address vulnerability and its underlying causes. Studies conducted in the regions of Timbuktu, Mopti and Ségou using the concepts of this framework were used as a basis for designing a number of programme initiatives on Local Governance, Nutrition, Shared Natural Resources Management, Women's Empowerment, Civil Society Capacity Building, etc.
- *Gender, diversity and mainstreaming of social inequalities*, in particular between women and men are central to CARE Mali's strategies and programmes since 2001. The creation and reinforcement of the women's '*Musow Ka Jigiya Ton*' (MJT) savings and credit associations, community organizations of natural resources users, of farms workers and women heads of households have contributed significantly to significant progress in leadership and empowerment of women participating in CARE's programmes.
- CARE Mali developed an *expertise on social management of crisis*, while systematically mainstreaming risk assessments and mitigation measures associated with AIDS, food insecurity and conflicts in its projects and programmes.

During the design phase for this programme CARE and the group of local partners had a workshop on partnership and how they saw it evolving. The following figure gives an outline of the results of this workshop where trends, challenges and the prospects of the partnership evolution were documented as seen by the participants.

The proposed partnership is based on a transfer of the experiences from CARE Mali to Malian NGOs particularly emphasising; assessments of the structural and underlying causes of poverty, addressing issues of discrimination and marginalization of vulnerable groups regarding initiatives of shared governance; participatory problems analysis involving locally elected officials, CSOs, and marginalized groups in, decision-making for the actions to undertaken for the management and delivery of social services. CARE Mali has acquired a great deal of experience in the mechanisms for developing CBOs and promoting management standards and delivery of quality services, including best practices of good governance in relation to the delivery of these services. Moreover, CARE

Mali's experience with the methods of action-research and participative monitoring and evaluation will be very useful for partner NGOs during the implementation of this Programme.

In addition to the technical aspects of the Programme, CARE will ensure the reinforcement of internal governance and sound management of Malian NGOs through trainings, but also and mainly through a hands-on training in administrative and financial management and reporting.

#### ***H) Local Partner Organizations***

##### ***An analysis of whom the local partner organisations represent and their role/strengths in civil society***

The programme is designed and will be implemented by a group of NGOs consisting of CARE International Mali, *Action Recherche pour le Développement des Initiatives Locales* (Action Research for the Development of Local Initiatives – (ARDIL), *Association Malienne pour la Promotion du Sahel* (Malian Association for the Promotion of the Sahel – AMAPROS), *Association d'Aide à la Femme et à l'Enfance* (Association for Assistance to Women and Youth – ASSAFE), *Cellule d'Appui aux Initiatives de Développement* (Unit of Support to Development Initiatives -- CAID), *Association pour l'Appui au Développement Intégré* (Association for the Support to Integrated Development -- AADI), *Association Malienne d'Initiatives et d'Actions pour le Développement* (Malian Association of Development Initiatives and Actions – AID Mali) and YAGTU.

The Partner NGOs are well anchored in the regions, with links with the communities and membership in the implementation region. Also, they represent a real social potential that can be mobilized at any time, even after the Programme. Moreover, they know the socio-cultural aspects that might be capable of influencing the activities.

The NGOs have acquired significant implementation capacity through the collaboration with local structures, and a long period of collaboration with CARE and other partners. They will be responsible for implementing the activities in the target areas. The development of partnership with national NGOs makes it possible for CARE to have greater outreach at a lower cost.

**ARDIL**- Action Recherche pour le Développement des Initiatives Locales was founded in 1992. They work with microfinance, health and environment issues. It is a regional organisation based in Timbuktu city. Several of the members used to work for CARE as extension agents on projects in the past. CARE has worked with ARDIL for many years and they have several other partners.

**CAID** – Cellule d'appui aux Initiatives de Développement – a local NGO founded in 2002, based in Tibmuktu. Their objective is to support local development at grassroots level.

**ASSAFE** – Association du Sahel d'Aide à la femme et à l'enfance - a national organisation established in 1993 by educated youth, with the goal of contributing to the socio economic development in Mali. They have a vision of being an organisation of reference for Children and Women related work in West Africa. Their aim is to fight poverty and marginalization and build capacity of local communities in health, education, defence of the right of women and children, microfinance, conflict prevention and management, and agriculture. They work in 4 regions, including Bamako and have several partners.

**AMAPROS** – Association Malienne pour le Promotion du Sahel, established in 1989 by educated youth from Segou, Sikasso and Koulikhourou, based in Bamako. Their aim is to improve the livelihoods for vulnerable and poor groups in Mali, particularly in the semi arid areas. They work within agriculture, microfinance, environment, human rights and health.

**YAMGIRIBOLO-TUMO** – Association pour la Promotion de la Femme, national Women's organisation, founded in 1997. Objective is to promote the role of women by contributing to increased

income for women in rural areas, and to better their livelihoods within health, education, and the development of innovative initiatives within health and education. The organisation has several international and local partners, and each programme of collaboration has its own programme manager. CARE started working with this organisation in 2006/07.

**AADI** – Association d'Appui au Développement Intégré is a national organisation established in 2001 to fight rural poverty, prevention of sexually transmitted diseases, HIV and AIDS, environment, literacy, promotion of women and children's rights, and the promotion of economic development. They have several partners.

**AID Mali** – Association Malienne d'Initiatives et d'Actions pour le Développement, a local NGO that was established in 1987. Their target groups are women and youth and their aim is to promote local initiatives for socio economic and cultural development in the whole country. They work within food security, health, basic education, gender equity, economic development, institutional strengthening and decentralisation.

All these organisations have worked with CARE before and also have other partners.

The programme will collaborate with decentralized agencies of the Government at the national level and in the three regions (Timbuktu, Mopti and Ségou). The final evaluations of previous projects of CARE Mali stressed the strategic importance of this collaboration, in the Malian socio-political context. The very good working relationships developed over 30 years ago will be maintained with the Authorities and the technical department of the Administration.

The decentralization process will not succeed in ensuring the inclusion of the various social groups and the different operating systems of spaces which make the specificity of the Malian civil society unless representatives of traditional and administrative local authorities are associated. Collaboration with "mixed" organizations, including official and unofficial actors involved in the development, will be an asset and promoted.

The programme will work in partnership with other development programmes and projects in the three regions and at the national level, in particular those working for the empowerment of women and girls, for instance UNICEF to defend children's rights. The key partners of the Norwegian Cooperation in Mali are also partners of the programme. Collaboration with Norwegian Church Aid and the Strømme Foundation would be further strengthened.

Finally, the programme will consolidate the participation of CARE and seven (7) Malian NGOs in networks like *Groupe de Coordination des zones Arides* (Group of Coordination of the Arid Regions – GcoAZ); *Forum des ONG Européennes au Mali* (Forum of European NGOs in Mali – FONGEM); *Comité de Coordination des ONG* (NGOs Coordination Committee – CCA ONG); *Gestion Non Violente des Conflits* (Nonviolent Conflicts Management – GENOVICO)

## ***I) Contribution to Civil Society***

### ***An analysis of how the programme contributes to strengthening civil society***

The long tradition of local associations in Mali predicted a success of the ongoing democratic decentralization. However, these organizations created on a free and voluntary basis are having difficulties of coordinating their actions. Most local organizations have not matured as true institutions, free from the presence or the capacity of small dominant elite. The election of officials is often a simple formality, as the status quo indicates. The few women elected in leadership positions in mixed organizations play a secondary role compared to their male colleagues. Social status often prevails on internal systems and the by-laws of the organization. Most organizations have weak and non transparent resource management systems, and very bad governance systems. Very few of them have a clear membership. They often don't have information and resources available and have limited

skills in project planning and resources mobilization. Democracy and decentralization introduced in Mali in the 1990s helped to significantly improve law. They made it possible for citizens to participate in the management of public affairs, to assert and achieve their citizenship as voters, an eligible persons<sup>44</sup>, tax payers, beneficiaries/Project designers, members and militants of associations, controllers and denouncers of abuses, potential applicants in justice against the abuse of powers and illegal acts, protectors of public assets

Seen from this angle, decentralization is only one simple opportunity offered to local organizations and citizens to improve their living conditions. For local organizations, democracy has many opportunities including among others:

- *Improving, strengthening the operation of institutions* through representation, decision-making, access to responsibilities, participation and accountability system;
- *Easy access to public resources*, their transparent management, distribution of wealth and their development;
- *Consolidation* of the recognized rights and promotion of the sense of accountability.

*The consolidation of democracy and democratic behaviour* by all citizens and organizations implies information and education and the full involvement of citizens in socio-economic and political projects of national and local interest. This information and education which will make it possible to maximize the stake relating to citizens' involvement and their organization as true actors capable of initiating and implementing development actions should build on what is already available to support emerging community dynamics. With this in mind, the programme formulated the following strategies for change that explain clearly how it will contribute to strengthening civil society.

*Building the capacities to form association*, for expression and collective actions of women and girls with the following objectives:

- i. Contribute to a better understanding of various dimensions/factors (agency, structure and relations) of economic, political, social and cultural empowerment of women and girls
- ii. Reinforce emerging woman and girl leaders who conduct advocacy actions for a better representation of women and girls in decision-making bodies;
- iii. Support MJT networks to join movements, alliances and agencies defending the rights of women and girls and promoting good governance at national and international levels.

*Strengthening governance and the efficiency of civil society* in order to achieve the vision of partnership between CARE and Malian NGOs to *form a well organized alliance which aims to achieve autonomy of community-based organizations. Our partnership is based on clear principles, mutual reinforcement of capacities, the implementation of common strategies and sharing responsibilities and risks.* The ultimate purpose of this partnership is *to have a community-based civil society engaged with local authorities for the defence of dignity and participative and responsible development.*

*Reduction of the vulnerability of households to crises through:*

- i. reinforcing the competences of the populations in vulnerable areas for alternative mitigation and management of conflicts and crises;
- ii. dialogue frameworks on emergencies and conflicts mitigation and management that recognize and integrate the proactive role and priorities of the youth and the nomads;
- iii. the development of operational emergency preparedness and response techniques and plans especially with the populations of Northern Mali

**A holistic approach based on rights** The three levels of anticipated changes are closely related and could not be achieved without the implementation of a holistic approach based on rights. This approach implies understanding and supporting local organizations and working in partnership with

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<sup>44</sup> Any citizen who meets these conditions may run for presidential, legislative or local elections.

Malian civil society organizations. It also requires working with all local actors: traditional authorities, local authorities, government departments.

Mixed organizations, made up of representatives of the civil society and the Government or its local representations will be also supported by the programme under the overall strengthening of the civil society. Local communities and community leaders are key actors of the programme and will be at the same time partners and beneficiaries.

#### ***J) Women's right, Equality, and the Environment***

##### ***A description of how women's rights and equality and climate and environmental concerns are attended to in the programme***

The programme in its entirety is destined to promote the rights of women. In terms of climate, and environment, the programme as such does not address these issues other than in terms of developing alternative livelihood strategies. However, Care Mali is developing a Climate Change Adaption programme, and will seek synergies between the two programmes. CARE Mali has undertaken a study on nomadic lifestyle and the impact of climate change to this lifestyle with the prospect of finding alternative strategies. The Emergency Preparedness plan mentioned under the risk chapter also relates to climatic changes. For further information see Part 1.2.N.

#### ***K) Sustainability***

##### ***Plans for phasing out the programme and ensuring sustainability (after the agreement period)***

In line with its objectives and strategies of change, the “*Empowering Women and Girls*” Programme is designed in to promote autonomous and viable development in the long run. This strategy rests on the opportunity of training which involves and confines responsibilities to the various actors for the promotion of an autonomous and sustainable development in the long run.

The programme will develop the capacities of key actor to identify and seize existing opportunities, to set up sustainable systems and mechanisms of voluntary choice, of transparent management and development of all human resources, in order to address multiple development challenges.

The support that the “*Empowering Women and Girls*” programme will provide to build the capacity of women, girls and other persons in charge of the CBO addresses the weaknesses of an emerging Malian rural civil society, with a very low level of education and poor level of information to be considered a credible and valid partner of local authorities and thus to constitute a counter power at the community, regional and national levels. Women and girls' CBOs will then be informed and trained on their roles and duties so that they can ensure the good management of production assets and fully play their role in local development process.

The “*Empowering Women and Girls*” Programme will assist women and girls in asserting their values by giving the proof of their capacities to assume community, political and economic responsibilities for the benefit of the country. Once their role and added value are recognized and accepted by all (local authorities and citizens), leaders of women's CBOs will feel valuable and will be at the same time motivated to take more actions and to accept more responsibilities.

Moreover, with the approach of research-action, the Programme puts actors of the implementation regions in the centre of a process of community dialogs and analysis of the root causes of poverty which will lead to decision-makings that will be acceptable to all. Generally, such consensus are better known and respected than the laws written in French, and will facilitate the ownership of the process and its continuation beyond the lifespan of the Programme.

Women's individual and collective capacity in the groupings and MJT networks and in enterprises will be the first guarantee of the sustainability of the results and will thus be regularly monitored and

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readjusted. The transfer of these competences to women will be consolidated by the development of accompanying technical measures by Micro Finance Institutions (IMF) and Technical Services (TS) of the Government whose effectiveness (satisfaction of current female customers and interest of the potential female customers) and viability (in particular with regards to transactions costs) will be monitored and analyzed by female entrepreneurs.

Certain components of the Programme are planned for four to five years, which gives the Programme the opportunity to develop other components which will prove to be essential for the sustainability of the effects and impacts during the implementation process. The last years of the Programme will be used to better monitor the impact and make necessary adjustments.

The partnership approach developed during the implementation of this programme with national NGOs will improve their performance with regards to the provision of quality services at a lower cost. With the withdrawal of the Programme, these NGOs remain potential partners to handle the requests of the actors of the programme.

### *L) Total budget*

During the first 3 years, the programme will be co-funded by EU. The budget below presents the total programme budget:

<b>MALI</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	17 024	17 024	16 998	16 998	16 998
CARE Norway (matching funds)	1 340	1 340	1 337	1 337	1 337
EU Commission	2 500	2 500	2 500	0	0
To be secured	0	1 363	507	2 892	4 109
<b>Total programme</b>	<b>20 864</b>	<b>22 227</b>	<b>21 343</b>	<b>21 228</b>	<b>22 445</b>

**V- PROGRAMME PLANS FOR CARE NIGER**  
**Women's and Girls' Leadership programme**

## 2.1 Situation Analysis

*An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

Niger is a landlocked Sahelian country spread over 1 267 000 km<sup>2</sup>. Its population is estimated at about 11 million people of whom 84% live in rural areas. Niger's population is young; 47.6% are under the age of 15 years. The annual demographic growth rate of 3.3% is one of the highest in the world. Demographic, economic and climatic factors, along with socio-political instability, interact to make poverty as a structural phenomenon. The high demographic growth rate could also lead to potentially explosive demands in all other social sectors: health, education, employment, housing, potable water, hygiene, sanitation, etc. Indicators such as life expectancy, infant and maternal mortality rates, education and per capita income place this country almost at the bottom of the world ranking in the Human Development Index (HDI-174<sup>th</sup> out of 177).

Most of Nigerien – women and children in particular – live in severe poverty characterized by low levels of education, limited access to information and, in general, inequitable distributions of resources and power. As in most countries where the agricultural economy is dominant, women are at the centre of social structures. Women represent key actors in social and economic systems of production and reproduction. The girl child becomes responsible for certain domestic chores very early and that creates an obstacle to girls' education. This discrimination in access to education and information is exacerbated in rural settings and in impoverished households. Households headed by women are among the poorest in terms of limited access to material and financial resources.

In the area of politics, women hold few positions in government administration, resulting in very little participation in the decision-making process. Niger has taken several concrete measures to affirm the political commitment to gender issues, such as adopting the National Policy for Women's Empowerment, the Poverty Reduction Strategy (PRS) and the law instituting the quota system (10% for elected, and 25% for nominees). Nevertheless, inequalities in gender relations persist despite the constitutional guarantee of sexual equality. Formal law and customary laws differ widely in how women's rights are considered and enacted. Persistence of socio-cultural pressures, women's lack of information about their rights and the absence of recognition of gender policies are some of the factors blocking the application of the laws. The work with a new family code; which would protect girls from early marriage and open up for the possibility of monogamous marriage contracts, stranded due to fierce opposition from religious groups.

Niger's Accelerated Development and Poverty Reduction Strategy (DRPS 2008-2012) aligns with the achievement of Millennium Development Goals (MDG). This strategy constitutes the framework for the economic social and cultural development and aims at improving Nigeriens' livelihoods through 7 strategic directions, including equitable access to quality social services, control of population growth, search for a strong, diversified, sustainable growth that creates jobs. Gender concerns have been clearly mentioned also in the Rural Development Strategy document (SDR). The sub programme in the sector Programme "*Reducing Households vulnerability*" aims at increasing the incomes of the most vulnerable groups to allow them to improve their access to money to get food. Access to financial services is also limited, although a number of decentralized financial structures and credit unions have been established over the last decade, and there is an impetus to support economic development with improved access, amongst others through the Special Programme of the President, that provides microcredit in particular to women.

## 2.2 Programme presentation

In brief; the programme will seek to empower women and girls so that they experience greater gender equity and fulfilment of rights in their communities. The programme will cover 6 of 8 districts in Niger and consists of two main components;

1) Women and Girls economic empowerment, that will focus on providing local and flexible financial services to poor women primarily, but also men through the village savings and loans methodology that CARE started developing in Niger and has worked with since the early 1990, called Mata Masu Dubara (MMD). Africa-wide the MMD model or the VS&L have shown that it works in a whole range of economic, physical and cultural contexts, including nomadic areas (pioneered again by CARE Niger) and in urban areas. Although started in Niger and expanding rapidly in numbers during a short period to reach approximately 200 000 women, the programme in Niger evolved into a women's leadership programme, building on the VS&L groups and supporting the evolution of networks of MMD groups with the aim of expanding organisational development and to include political empowerment and leadership for women in Niger. This has resulted in increased influence and social recognition of MMD women, but a consequence of this strategic choice has been that very few new groups have been established during the last few years. CARE Niger wishes to re-embark on a mission of bringing the VS&L type of financial services out to larger number of people. This will be undertaken in collaboration with local and international NGOs, CBOs and association of MMD Village Agents.

2) The Women and Girls leadership component. This component is based on, and will further previous achievements obtained through the "MMD and Leadership" programme that started in 2006, particularly the promotion of MMD groups and networks, and their actual level of participation in citizenship activities. The implementation strategy focuses on enabling women members of MMD groups and networks to generate individual and collective impacts to increase profits and take full advantage of economic opportunities. The action is part of an economic, social and political continuum. It also involves establishing mutually advantageous ties between the groups/networks and others civil society organization to launch the basis for a socially powerful movement able to influence local, regional and national decisions and advocate for policies in favour of women's rights and gender equity.

### *A) Development Goal*

**Development goal:** To create, in partnership with other civil society stakeholders, conditions for equitable and sustainable development focused on promoting good governance and protecting household resources.

### *B) Programme Goal*

**Programme goal:** By 2015, marginalised women, girls and men (75% women, girls), organised in VS&L groups and networks have greater and more equitable access to and control over economic resources and participate in local decision making at all levels, experiencing greater fulfilment of their rights.

- i. % women/men who claim improved intra-household relations, distribution of tasks and responsibilities
- ii. % improvement in vulnerability profile of primary impact group
- iii. % women holding decision making positions at community level
- iv. Proportion of community members who know women's rights

By 2015, this programme will seek to have sustainable impact on women and girls in particular, in terms of poverty reduction, increased social justice and gender equity. The programme will address some of the underlying causes of poverty like gender discrimination, constraining religious and cultural practices, the voicelessness of vulnerable groups and weak participation of women in decision making bodies, unequal access to assets and services, and lack of information on and enforcement of texts in favour of gender equity that contribute to perpetuating the poverty cycle in Niger.

### ***C) Target group***

The primary impact group of the programme is 375 000 marginalized women and girls in six out of eight regions of the country; Zinder, Maradi, Tahoua, Dosso, Tillabéry and Niamey. In addition 125 000 men and boys in the same communities will be directly targeted. At least 60% of the impact groups belong to the poorer segments of the population (based on vulnerability assessments and wealth ranking).

Till now CARE has only targeted women with the VS&L activities in Niger, and the MMD groups and networks are exclusively female. This was justified on the grounds that women have traditionally been economically marginalized and socially disempowered. Research in other countries has, however, shown that exclusive female access to community-managed microfinance services may have unintended negative consequences. It is also becoming clear in Niger that men, who previously paid little attention to the work of these groups, have seen the benefits and also want to become involved. At the same time women see it as important that men become involved, and that through male groups' issues like gender equity and women's rights can be discussed. Women see the involvement of men as a possibility to improve gender relations and harmony in the family and society. Consequently, the programme will gradually introduce open-access to MMD/VSL training services for both men and women. The programme will also support capacity-building activities such as literacy, training in gender, leadership, and human rights, and providing economic information to benefit men and boys so they will have enough information to be able to contribute toward building a more gender equitable and harmonious society. HIV and AIDS prevention and anti stigmatisation efforts will be mainstreamed in the programme.

Women leaders will also continue to be a specific target groups for further development of women's leadership.

Finally, partners, NGOs and associations of civil society will benefit from training and capacity building.

### ***D) Expected results***

#### **Expected outcome 1:**

By 2015 marginalised women and men have improved economic security

- i. % of women (marginalised) with control over assets in household
- ii. % of women/men (marginalised) with capacity to cope with economic shocks
- iii. % of participants able to make viable economic opportunity choices

#### **Expected outputs:**

1) A self driven system of MMD training based on local capacities (village agents, NGOs and MMD networks) is operational.

- i. # of independent MMD/VS&L groups that continue to provide savings, credit and micro-insurance services to their members
- ii. # of functional spontaneous MMD/VS&L groups created

- iii. # of functional MMD/VS&L groups created by local competencies/structures trained
  - iv. Number of MMD groups and networks having a deliberate strategy for integrating extremely vulnerable women
- 2) By 2015, 500 000 participants (75% women/girls) have sustainable access to basic financial services adjusted to their need and understand the opportunities and risks presented by linkage to MFIs and enter into prudent and productive relationships.
- i. Rate of coverage by MMD system (population and villages covered)
  - ii. MFIs and other rural financial institutions agree on, and implement a code of conduct regarding the external financing of MMD/VS&L portfolios
  - iii. # of participants with sustainable access to basic financial services through their membership in MMD groups and networks
  - iv. MFIs and MMD/VS&L groups have contractual relationships that safely enhance the activities of both
- 3) By 2015 women and girls enjoy their right to make economic choices, and to access and benefit from productive resources
- i. % of women and girls MMD trained in business development (entrepreneurship)
  - ii. % of women and girls MMD reporting to have started or developed their income generating activity by having increased productive assets and resources
  - iii. # of women and girls reporting access to loans for profitable income generating activities

### **Expected Outcome 2**

By 2015, women and girls have increased knowledge and capacity for influencing decisions in favour of their rights and of greater gender equality.

- i. Changes in attitude (by men and women) around women's role in decision-making
- ii. % of women aware of their citizenship and rights
- iii. % of women who vote (those who use their right to vote)
- iv. % of women that report meaningful participation in decision-making bodies at community level
- v. % of women making informed choices/decisions with regards to their SRH
- vi. % of women reporting satisfaction with the availability and quality of SRHR related services

### **Expected Outputs**

- 1) Women and girls have increased knowledge of their citizenship, human rights and responsibilities, accountability, conflict prevention and management.
- i. Number of local competencies trained, that are able to manage training session on citizenship, human rights, responsibility, accountability, conflict prevention and resolution
  - ii. Number of participants trained by thematic (thematic : citizenship, human rights, responsibility, accountability, conflict prevention and resolution and all will be disaggregated for men, women, boys and girls)
  - iii. Number of groups (men, women, boys, girls) who know citizenship, human rights, responsibility, accountability, conflict prevention and resolution
- 2) By 2015, women and girls' leadership is visible in community development actions
- i. % women and girls leaders who affirm themselves in mixed community /communal structures
  - ii. # of community activities/assets managed by women
- 3) Women, girls and youth in MMD groups/networks have increased capacity for communication, negotiation, community action and advocacy
- i. Number of groups / network that design and implement their actions plan and their ODP (organizational development plan) by at least 75% of planned activities
  - ii. # of social dialogues between MMD groups and networks/alliances and community leaders

- iii. Number of commitment (community action, conflict resolution) involving women and networks implemented
- iv. # of MMD networks having established emergency funds (social funds).

**Expected Outcome 3:**

By 2015 women's and girls' rights are being defended by a social movement of men, women and local leaders and institutions.

- i. Effective implementation of women's civic & political rights in relevant government laws, policies and plans at national & local levels
- ii. Enforcement of laws and policies addressing GBV
- iii. % of identified GBV survivors who utilize available GBV related services
- iv. % women elected in the futures elections
- v. Number of strategic alliance to boost social movement ( MMD, Network, GON, civil society organisations)
- vi. Number of primary school which are integrating gender equality in their curricula

**Expected Outputs**

- 1) Local leaders (men and women) are more gender aware and promote gender equality.
  - i. # of local representatives (male and female) trained in gender equality analysis and planning
  - ii. Number of community /communes that initiate action in favour of gender equity
  - iii. # of gender and equity consencious decisions taken in communal councils, (such as prohibition of early marriage)
  - iv. # of meetings at communal level where gender issues are discussed
  - v. # of awareness training sessions on gender equality in primary school
- 2) By 2015 women fully participate in the management of local and communal affairs
  - i. Number of women leaders trained on “active gender equality participation” and productive meeting techniques
  - ii. Evidence base of women influencing gender equality decision at community and commune level
- 3) Structural mechanisms for the protection and promotion of gender equity are operational (gender advisors, national observatory, ministry of women's promotion and child protection)
  - i. Level of functionality of the national observatory (national and regional level)
  - ii. Number of laws and regulations adopted and implemented as regard to gender equality
  - iii. Number of local competencies trained on GBV
  - iv. Number of recourse done trough the local GBV trained competencies

***E) Anticipated Risks***

***Assessment of anticipated risks and how these may be countered***

The programme's monitoring and evaluation unit will be monitoring the hypothesis and assumptions that the programme builds on and suggest corrective action if needed.

The well organised and disciplined MMD groups are attractive clients for the increasing number of MFIs. Not all MFIs are viable and have adequate systems and controls and groups may run the risk of engaging with MFI that are more interested in expanding their portfolio with the result of brining groups into debts that they cannot handle. The programme will prepare groups to understand the opportunities and risks involved in linking with MFIs.

The programme will help women local representatives, and women to stand for election. With this the programme runs a risk that the movement of MMD becomes very politisized. CARE will take precautions so that the programme will not be associated with any particular political party.

Therefore, regular monitoring of all these hypotheses and of all risks will be carried out. Intensive awareness raising of the MMD women's network and of local women representatives will be carried out regarding these risk.

There is always a risk of food crisis linked to bad harvest, but the programme considers this but a variable with which the programme must work and activities like MMD run cereal banks have proved effective in previous crisis.

Working with gender and rights issues and strengthening women's economic security might lead to resistance and even violence against women. The programme will seek to work with men and religious leaders to have key persons on board who can influence public opinion on these matters.

The programme will work with many different partners, and there is always a risk of reduced implementation speed and control while aiming to develop fruitful and equal partnerships. The programme will work to improve ways of collaboration, through capacity assessments and capacity building plans that will be elaborated and implemented.

#### ***F) Relevance to Donors and Authorities***

##### ***Analysis of the relationship to other donors, recipient authorities and their official plans and goals***

Partnerships, strategic alliance and collaborative relationships will be strongly but progressively developed as the key implementation strategy for the programme to meet its objectives. The development of these different relationships involves promoting synergy and mutual learning to develop institutional, organizational and technical capacities in order to provide quality services in relation to the components of the programme. The implementation of "Women and Girls' economic empowerment" also contributes to CARE's "Access Africa" programme – a multi country programme that aims to provide 30 million people with access to financial services within the next 10 years. Plan Niger is also committed to this and will be a close collaborating partner. The development of decentralised financial services is also part of the Niger Rural Development Strategy (RDS) which emphasizes research and promotion of adapted financial services to the most vulnerable. In fact, the Government of Niger aims at improving the rate of financial services penetration from 7 to 15% by the year 2015. Other contributors in promoting access to financial services are; World Vision, CRS, Islamic Relief, Mercy Corps, SNV, etc.), NGOs/National Development Associations, microfinance institutions (MFI) and the Ministry of Community Development.

For the implementation of "Women and Girls' leadership" component the programme will advocate for the collaboration with other donors to support and boost the implementation of collective activities with a socio-community impact within the action plans of the MMD networks and federations. Collaboration on these actions plans should give priority to community activities that build up women capacities and encourage their leadership. Such partners are WFP, UNICEF, UNIFEM, Government institutions, Ministry for Woman Development and Child Protection, Ministry for Community Development, Regional Literacy and Adult training Office, Rural Code Commission, Islamic Regional organizations and Plan Niger.

#### ***G) Grant Recipient's Added Value***

##### ***Assessment of the Grant Recipient's contributions to local partners other than financial***

To implement development activities, CARE has competent and motivated personnel made up equally of men and women. Staff benefit from thorough training in the programme approaches of CARE

International (vulnerability analysis and household livelihood security, gender, diversity, rights-based approach, analysis of underlying causes of poverty, conflict prevention and management, unified framework, performance management, security, finances, etc. Adopting the unified framework has resulted in its better understanding of the underlying causes of poverty and social injustice in Niger. It has gained nationwide recognition for its expertise in analyzing the vulnerability of rural and urban households. CARE has expertise in the VS&L and the MMD approach as well as a range of participatory approaches for working on gender, livelihood security, agriculture and natural resource management, health, HIV and AIDS, conflict resolution and management, Behaviour Change Communication, community vulnerability monitoring, community early-warning and emergency response systems, and community monitoring and treatment of moderate malnutrition are some additional techniques that CARE uses and can contribute to the learning of partners. Capacity building based on CARE's experience will be the additional contribution to the local partners. CARE will lead the alliance of CBO, NGO and institutional players that will collaborate in the VS&L in the Access Africa component in terms of coordination of monitoring and evaluation and technical support and training.

#### ***H) Local Partner Organizations***

##### ***Analysis of whom the local partner organisations represent and their role / strengths in civil society***

The programme will be implemented by a variety of different partners, with different roles and some of them are not yet defined. The various types of partnerships are:

- *Co-execution partners* that share the responsibility for implementing programme activities such as MMD networks and federations, local organisations of village agents, literacy teachers etc. and networks of local women representatives and the communes to which they belong.
- *Support partners* who fund one or more programme activity package (including capacity building of Co-execution partners) – ex. WFP, PLAN Niger
- *Supervision partners* who are the government structures that the Co-execution Partners report to (e.g Ministry of Women's promotion, Ministry of the Interior and Community Development).

The partnership matrix is presented in Annex 1.

#### ***I) Contribution to civil society***

##### ***Analysis of how the programme assists strengthening of civil society***

CARE Niger's 2005-2009 Long-Range Strategic Plan (LRSP) reorients and adapts the goal of CARE Niger to internal and external changes of context. It establishes an important place for strengthening civil society and partnerships in its pursuit of sustainable development. Consequently, for those five years, CARE Niger's goal is to: "*create, in partnership with other civil society stakeholders, conditions for equitable and sustainable development focused on promoting good governance and protecting household resources.*" A new LRSP is under development for the period 2010 – 2015.

The Women's and Girls Leadership programme will contribute to further developing the MMD movement as a vocal and strong representative of Niger's female civil society, engaging with local and communal authorities in voicing concerns and claiming rights for women and girls. Their position in the local decision making arena can even deal with some delicate topics of the programme (domestic violence, women and land rights, consequences of smoking, stigma of AIDS victims, education of girls, forced and early marriage, management of family grain store, etc.). The experiments carried out by women on domestic violence and on smoking are already encouraging examples of this.

The programme will back civil society's efforts to have texts and laws that do not conform to the national gender policies be reviewed and revised. Support will be provided for the development of an advocacy strategy to improve women's socio-economic and political situation, and for the creation of a constituent base made up of elected officials, leaders, and women's empowerment activists to carry out ongoing action in women's advocacy. This constituent base will be the vanguard for the entire process and will assume the role of "manager" of advocacy achievements. It will also monitor commitments, resolutions and other acts gained through advocacy efforts. The programme will make the necessary efforts to ensure integration of the most vulnerable members of society.

#### ***J) Women's right, Equality, and the Environment***

##### ***Description of how women's rights and equality, and the climate and environmental concerns are attended to in the programme***

The entire programme is meant to empower women and contribute to greater gender equity by enhancing the economic security and political participation of women.

Niger is a country where climate changes are felt very strongly. CARE conducted a study that looked at climatic changes and their consequences for the people of Niger. One of the conclusions were that the activities that contribute most to help people adapt to these changes are the women's savings and credit groups, that allow greater flexibility and increased economic security, in many cases combined with management of cereal banks. For further discussion see Part 1.2.N.

#### ***K) Sustainability***

##### ***Plans for phasing out the programme and ensuring sustainability***

The programme is intended to last for 7 years<sup>45</sup>, and its phase-out strategy will involve a gradual withdrawal through the following actions:

- Enabling MMD groups and networks to structure their organizations to eventually become strong and competitive partners: This requires preparing networks and federations for engaging in full-fledged partnerships. Their integration into civil society and the strengthening of civil society are likely guarantees for the sustainability of the programme's activities.
- The programme plans to provide substantial support for carrying out the enabling strategy for women local representatives so they can fully perform their roles on community counsels and serve as modes for enabling and coaching other women.
- Supporting the efforts to professionalize local skills (VA, literacy teachers, birth attendants, first-aid providers, *wayé kai* committees, etc.) to better train MMD organizations and eventually turn them into service providers: Increasing local skills (Village Agents) conforms to the idea of consolidating achievements to perpetuate interventions.
- Building the capacities of men and women local representatives to practice good governance at the community level through gender-sensitive planning: The programme will help establish genuine local governance through a variety of supports (training, study trips, intercommunity social dialogs, and operating materials) provided to new communes so that they can better serve the public. The communes are already beginning to introduce initiatives favourable to women, thanks to leadership promotion activities for rural women carried out by the programme.
- The programme will encourage meetings between MMD organizations and others involved in development to create partnerships. Special emphasis will be placed on strengthening and

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<sup>45</sup> CARE will seek funding outside this cooperation agreement for additional funding to carry the programme till the end of 2015.

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supporting technical services, which, in so far as they function properly, will provide support event after the programme ends.

***L) Total budget***

The budget below presents the total programme budget:

<b>NIGER</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	7 863	7 859	7 859	7 859	7 859
CARE Norway (matching funds)	809	809	809	809	809
To be secured	4 327	11 125	10 236	10 186	10 622
Total programme	12 999	19 793	18 904	18 854	19 290

**VI- PROGRAMME PLANS FOR CARE RWANDA**  
**Isaro Programme- Promoting Gender Equality in Rwanda**

## **2.1 Situation Analysis**

### ***An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas***

Rwanda has been through genocide in 1994 that claimed the lives of hundreds of thousands of people traumatizing the country, and disrupting trust and understanding between people and communities. The national economy was in a down turn and there was a very high level of poverty. At present, Rwanda shows significant signs of growth but high level of poverty still remains amid the nation. In the context of Rwanda, CARE identifies the underlying causes of the observed poverty as being poor political leadership, social and cultural factors that create and perpetuate harmful practises and gender inequality, and limited availability of resources and opportunities.

The poverty reduction strategy framework of Rwanda is informed by the goals of the millennium declaration through which the government is trying to bring about human and economic development. As part of the human development strategies, the government of Rwanda is particularly resolute on the implementation of the third MDG goal which focuses on gender equality and the empowerment of women.

The government has ratified all international charters and treaties linked to women and children and also passed domestic laws to eliminate gender discrimination from legislation. A bill against Gender Based Violence has been drafted and a national policy on the prevention of all forms of abuse, violence and exploitation against women and children is under development. There is also an affirmative action provision of 30% for women's representation in political positions. Therefore, it is clear that the government prioritizes the need to ensure the effective participation of women in the overall national development. However, a lot more needs to be done, particularly at community level, to ensure that women are able to competently handle political leadership, and participate effectively in political processes. To date, certain actual challenges in the way of the attainment of this goal still remain which include, women's limited participation in political processes, high levels of gender based violence, constrained reproductive rights, negative cultural attitudes and practices, and limited local capacities to address root causes of gender inequality.

In order to address these concerns the Isaro<sup>46</sup> programme will work on improving gender equality situation, and women's economic and political empowerment to help them to have more influence over their own life, as well as access resources and play role in decision making process.

## **2.2 Programme Presentation**

### ***A) Development Goal***

**Development goal:** Extremely poor people in Rwanda, particularly women and girls, are economically secured, exercise their right to health and education, and influence decision making at all levels in the society.

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<sup>46</sup> Isaro means "Jewel" in Kinyarwanda and refers to something exquisite and prestigious. Everyone would like to have a Jewel. To get a jewel one has to work hard, and once one has a jewel s/he will value and protect it. Beneficiaries for the programme will see the programme and outcome as a Gem which they would like to keep and protect i.e. the social and empowerment due to the programme.

## ***B) Programme Goal***

**Programme goal:** By 2013, members of voluntary savings and loan groups are economically, socially and politically empowered and are more gender equal<sup>47</sup>.

- i. % women members reporting an improvement in their economic livelihoods
- ii. % women members reporting an increase in participation in decision making at household - and community level
- iii. % women members reporting satisfaction regarding local social and political leaders' responses to gender issues
- iv. % women members reporting reduction of incidence of gender based violence

The Isaro programme will address some of the underlying causes of poverty in Rwanda, such as deep economic impoverishment and marginalization of women and weak participation of women in decision making bodies. Through this programme, CARE and partners will implement initiatives aiming at empowering vulnerable women in the southern province in order to address social cultural norms and barriers, and fully participate in decision-making processes, improving their social and economic status.

The Isaro programme will build on the achievements of POWER project (which was also funded by Norad from 2006-2008). CARE and partners believe that the following has to take place in order to make sustainable impact and change:

- Working with men as allies to create changed attitudes
- Local level implementation and national level influence on policy formulation and monitoring for sustainable change
- Continuous analysis of underlying causes of poverty
- Deliberate learning and reflection in order to uncover the socio-cultural norms and practices that impede or contribute to promote gender equity
- Strategic partnership with national level networks to influence policy and to build capacity of CSOs to ensure sustainability

## ***C) Target group***

Isaro will continue to work with the existing 2 571 savings and loan groups that were established during the previous POWER project. Simultaneously, the programme will facilitate the establishment of new groups. In total, the programme will give support to 58 124 individuals, 80% of whom are women. The programme's primary impact group will be marginalized women who are members of these groups. These women have been selected based on participatory vulnerability assessments at community level, and include particularly poor women<sup>48</sup>; women heads of households; women taking care of orphans and vulnerable children; women living with HIV, women from the marginalized ethnic group, the Batwa. The programme also work with men, not as "perpetrators", but as leaders, husbands, brothers and members of the community, who can play an important role in prevention of GBV and as role models for other men. The groups include about 20% men.

The programme will impact a total of 290 620 considering 5 as medium size household in Rwanda.

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<sup>47</sup> The programme will be implemented in six districts, Nyaruguru, Gisagara, Nyamagabe, Ruhango, Huye and Nyanza in the Southern Province of Rwanda.

<sup>48</sup> Belonging to the poorest categories according to the classification in the National Integrated Living Condition Survey 2005/6.

**D) Expected results**

**Expected outcome 1:**

Members of the voluntary savings (particularly women) and loan groups have an improved economic security

- i. % of group members reporting an increased income
- ii. % of women registering an increase in access and control of productive assets
- iii. % increase in the level of savings at the household level

**Expected outputs:**

1) Groups are operating credit and savings activities and abiding to democratic rules and internal regulations

- i. X # of groups trained in the savings and loan methodology per year
- ii. X # groups graduated
- iii. Cumulative savings
- iv. Cumulative loans taken

2) Group members (disaggregated by gender) have started or developed their income generating activities

- i. X # of groups have been trained in income generating activities (individual and group activities)
- ii. X # of members have taken loans for profitable income generating activities
- iii. X % of members are producing marketable products

3) Groups are accessing “pro-poor” financial services

- i. # of groups accessing resources from financial services

**Expected outcome 2:**

Saving and loan group members benefit from community-based gender based violence prevention and support mechanisms at the local level.

- i. % of women reporting decreased incidence of violence from partner when they express their opinion
- ii. Increase in # of GBV survivors utilizing locally available care and support services
- iii. Level of community satisfaction with local GBV response strategies

**Expected outputs:**

1) Saving and loan group members aware about the negative consequences of GBV

- i. # awareness and sensitization activities carried out by the groups
- ii. # of actions taken by VSL groups to respond to GBV cases
- iii. # men publicly opposing GBV

2) Relevant structures providing appropriate GBV response services

- i. # of people from security and justice agencies trained on GBV and referral mechanisms
- ii. # health staff trained on management of GBV cases
- iii. # operational referral networks
- iv. Availability of local response plans

**Expected outcome 3:**

Female group members are influencing decision making at various levels

- i. % of women elected in decision making structures at the community level and representing women’s concerns

- ii. % of women who report making key decisions equally with partner at household level (e.g. sending children to school, household expenditure, etc.)
- iii. # of women activists claiming their basic rights at community level

**Expected Outputs:**

- 1) Female group members have increased understanding of political processes
  - i. # of women that report an increased understanding of their civic and political rights
  - ii. # of round table and town hall meetings carried out
  - iii. # of women taking part in visits to political institutions at various levels
- 2) Female group members have increased decision making capacity at household level
  - i. Proportion of women who have invested in health and children's education during the last 12 months
  - ii. Proportion of males headed households that report involvement of their spouses/partner in household decision making processes

***E) Anticipated Risks***

***An assessment of anticipated risks and how these may be countered***

The major risks posed in the way of the success of this programme are related to patriarchy and socio-cultural factors, increased level of GBV incidents, and the limited resources of concerned organizations to provide support to GBV victims.

- *Patriarchy and socio-cultural threats* - The traditional Rwandan society is highly patriarchal making women and girls dependent on men for most of the important livelihood aspects. From previous experiences in Rwanda, CARE has learnt that involving men, the wider community and community leaders in its activities provides an opportunity for them to experience and appreciate the benefits that accrue from women's empowerment and respect for women's rights. Therefore, the programme plans to involve men and community members in order for them to take an active part in bringing about women's empowerment.
- *Increase in the level of GBV* - There is a possibility that men will be threatened by women's increased levels of income and capacity to own resources, and in response may increase the level of violence against them. This however will be mitigated by engaging men as allies (through the men engagement strategy) by sensitizing them towards the benefits obtained from socially and economically empowering women at both national and household levels.
- *Limited resource of concerned GBV Service Providers* - It is possible that as a result of the increased awareness among community members about GBV and gender inequalities, there will be an increase in the demand for preventive and support services. This will be mitigated by training service providers to make them available at all levels and by establishing referral systems to better equipped stations.

***F) Relevance to Donors and Recipient Countries***

***An analysis of the relationship to other donors, recipient authorities and their official plans and goals***

CARE International commenced programming in Rwanda in 1984 and has since then developed extensive programme management and capacity building experience in emergency, rehabilitation and development programmes in all provinces of the country assisting more than one million beneficiaries. In its endeavour to work in diverse development areas, CARE Rwanda has working experience with

various development actors such as USAID, EU, UN agencies (UNHCR, IFAD, WHO, UNICEF, etc), DFID, the Dutch Government, the Austrian Government, the Norwegian Government, as well as many private foundations. These experience and the relationships that have been built over the years put CARE at an advantage of having a very strong support base in Rwanda.

CARE Rwanda also enjoys a strong and well established partnership with government bodies through its different advocacy initiatives in order to influence the development and enforcement of policies at the national level. CARE Rwanda is a member of different task forces led by different national ministries and its opinion on policy documents, in particular relating to children and women are very often sought after by the Government. The government of Rwanda recognizes the need to ensure women's self-development and their contribution to national development and hence values the technical support offered by organizations such as CARE. As a result, the government has adopted some of CARE's models into the national policies and strategies in Rwanda (such as CARE's recent contribution to the formulation of the national GBV strategic plan, the Nkundabana model which has been incorporated in the national strategic plan for orphans and vulnerable children 2007-2011, and the HIV case management model which is now being considered as the model for palliative care in Rwanda).

### ***G) Grant Recipient's Added Value***

#### ***An assessment of the Grant Recipient's contributions to local partners other than financial assistance – in other words what is the added value of the Grant Recipient***

The key added value is drawing on CARE's networks and experience to influence the implementation of existing policies that promote women's participation in politics and the prevention of GBV. CARE is involved in various government technical committees and hence positioned to provide feedback on the implementation of important policies and to also share experiences on best practices.

With the aim to build sufficient local capacity among civil society partners and community-based-organizations to continue and possibly scale-up interventions that seek to promote gender equality after the completion of the programme period, CARE will provide the required capacity building support to its partners through designing and implementing institutional and organizational strengthening plans. Institutional capacity building will involve both partners' staff and their external partners from civil society, government and donors. CARE will build organizational and technical capacity of its partners based on current systems but also taking into account necessary changes based on the institutional capacity assessment findings in order to ensure that systems and procedures are allowing partners to be more efficient in their operation and commitment to fulfil their respective mission.

At sub-district level CARE will facilitate possibilities for community groups to carryout their GBV plans, and will create linkages and opportunities for enterprise development for the VSL groups.

### ***H) Local Partner Organization***

#### ***An analysis of whom the local partner organisations represent and their role/strengths in civil society***

CARE Rwanda's local partner organization, the CNF (National Women's Council) implements programmes that seek to prevent GBV, develop women's economic potential, and support women's participation in politics. The CNF is established by the Rwandan constitution of June 2003, with the purpose to ensure participation of women in decision making at all levels throughout the country. The Council is a space for discussion on fulfilment of the rights of women and advocacy for greater and

better representation of women in governance bodies. Members of CNF are volunteer women aged above 18 that work at village, sub-district, district, province and national levels. CARE & CNF have a long collaboration history on various tasks related to the situation of women and gender equality.

Through the proposed programme, CARE will work together with CNF to develop its institutional, organisational and technical capacities. During the programme implementation, a joint programme team composed of staff from CNF, Isaro programme manager, field officer and M&E personnel will jointly plan, implement and carryout ongoing monitoring and evaluation of all programme activities. This will allow being much more cost-effective on the ground and will also improve cross-learning between the organizations and ensure that CNF has had adequate exposure and been involved in all aspects of the programme, building the capacity to replicate such interventions independently at the end of the programme.

### ***I) Contribution to Civil Society***

#### ***An analysis of how the programme contributes to strengthening civil society***

Civil society organizations in Rwanda are categorized into informal organisations (grassroots level organizations such as burial societies, and credit and saving schemes often not bound by legal formalities) and formal organisations (mostly foreign funded). Several factors combine to undermine the efficiency of both types of civil society organizations and these includes extreme poverty, social and economic vulnerability, low levels of education, high levels of mistrust within civil society, and between society and the state. This factors have made grassroot level associations to mostly focus on livelihood issues with little capacity or appetite to engage in a more strategic way with influence public issues. This has in turn made it difficult for urban based advocacy NGOs to make connections to the grassroots. In light of this context, the programme will contribute to the strengthening of the civil society through:

- Voluntary saving and loan groups which will serve as an entry point for further interventions geared towards women's empowerment, social cohesions and social action.
- Social Action Analysis to ensure that communities are fully involved in identifying, planning, and addressing their common issues of concern.
- Engaging men and communities to hasten the process of women's empowerment and bringing about attitudinal changes.
- Building the capacity of local partners who will continue with the programme implementation and support after the conclusion of the programme period.

### ***J) Women's rights, Equality, and the Environment***

#### ***A description of how women's rights and equality and climate and environmental concerns are attended to in the programme***

Women's rights and equality issues lie at the heart of the proposed programme. The programme seeks to help women and girls achieve economic security, exercise their rights to services, and influence decision-making at all levels. The implementation will be building from previous achievements and through scaling up successful strategies in order to bring about the empowerment of women and the protection of their human rights. Activities will specifically focus on women's economic security, prevention of GBV and rehabilitation for GBV survivors, and increase women's participation and representation in politics at all levels. In order to address the root causes of poverty among women and gender inequality the programme aims to engage men to be active agents to change the unequal patriarchal system of the country. Economic empowerment will enable women to be independent and resourceful hence creating alternative sources of income for themselves and by so doing give relief to

the over-exploited land resources which disproportionately support the livelihood of the agricultural society. For further discussion see point 1.2.N.

### ***K) Sustainability***

#### ***Plans for phasing out the programme and ensuring sustainability (after the agreement period)***

##### **Financial sustainability**

The savings and loan methodology does not require the establishment of expensive management structures or a revolving loan fund. The methodology is designed to demonstrate the value of savings, particularly in the context of a collective effort. Once the savings and loan groups are established and trained, they are self-managed and operate with those funds that were accumulated from their own savings and interests on loans. During programme implementation, the programme staff will have sufficient time and opportunity to follow-up on the savings and loan groups to ensure the correct use of the methodology. A specific exit strategy is not required because neither do the groups depend on the ongoing support from CARE, nor will an external fund be established by the programme. In addition the very strong reimbursement rate of 95% contributes to sustainability of the model.

For funding of GBV community response plans, an initial financial support will be given by the programme but the plans will then be incorporated in the Sectors and District development plans for support. Also, GBV committees will be trained in fund raising activities so that they can organize fund raising events in the community.

##### **Institutional level sustainability**

Institutional Strengthening and Organizational Development (IDOS) and capacity building are critical components of the programme in order to enable them to replicate similar interventions. IDOS and capacity building will take different forms. Support from an IDOS expert might be sought. Different levels of staff will be trained to ensure learning throughout the organizations, in their place of work, through training periods at CARE's office, through a mentoring system by CARE staff, through participation in relevant trainings and workshops and on-the-job through secondment to the programme team. CARE believes that local partners already know their strengths and weaknesses and capacity building needs better than any external organization or expert and that capacity building can only be successful if it uses the knowledge of existing staff.

Programme partners and CARE will be working hand and hand at all levels of district administration and closely with communities, ensuring that the activities are owned and ultimately managed by the communities themselves. Besides building the capacity of local NGO partners, the programme focuses on building the capacity of various grass-root organizations and CBOs as a way to reduce incidence of violence and promote participation of women in political structures. Capacity-building of the savings and loan groups, GBV committee members and service providers is an important strategy to ensure institutional sustainability.

The programme will also establish decentralized programme steering committee in each district which will gather local leaders and key stakeholders at decentralized level in addition to the programme implementing partners. These committees will ensure ownership from local leaders over the intervention right from the start, hence enhancing its sustainability. Their members will play a key role in facilitating activities and particularly in mobilizing the population. Their inputs based on their knowledge of the local situation and problems will ensure that programme action plans are not disconnected from reality and actual needs. In order for committee members to fully play their role, they will be trained in violence prevention and response and what is expected of them.

Finally, GBV committees at grass root level, local officials, CBOs, and most importantly communities themselves will play a direct role in designing, monitoring and evaluation of the programme and in

shaping their own responses to the problems of violence and women’s rights in their communities, thanks to the introduction of participatory approaches in the programme.

**Social and cultural sustainability**

Among the root causes of GBV that the programme will try to address are some extremely sensitive issues, linked to social and cultural norms and practices that need a tactful approach in order not to do more harm than good. When dealing with GBV, the issue of backlash and potential repercussions for the victims must always be considered but, in the case of this particular programme that aims at addressing the underlying causes of violence, the entire social and cultural system needs to be scrutinized and analyzed to see how it contributes to GBV and gender inequalities. It means looking at how gender roles are considered in Rwanda and analyzing deeply embedded beliefs and traditions that contribute to GBV. By trying to address these issues too directly without considering Rwanda’s introvert culture, how taboo sexuality continues to be, the role of women in a highly patriarchal society, how men’s identity is defined and many other aspects, has the potential to refrain beneficiaries from openly participating. It is therefore of the utmost importance that the “Behaviour, Change, Communication ” (BCC) intervention is done in a very intelligent, socially and culturally sensitive way, which is exactly why using the social analysis approach and Stepping Stones methodology have been chosen for this intervention. Social analysis approaches help local stakeholders reflect on their own perceptions of underlying causes and their impact, as local perceptions often differ from those of a development agency. For example, an external agency might easily overlook the fact that, in Rwanda, 67, 7% of women agree with the fact that an exemplary wife owes unconditional obedience to her husband<sup>49</sup>. Social analysis recognizes that community members are the experts in understanding their own needs and social realities. For this reason, social analysis and related actions, in the case of this programme, the type of BCC interventions, are chosen and led by community members. The programme team will play the role of facilitator. Participants will be better prepared to plan and implement BCC interventions consistent with their own reality, and a greater sense of ownership is created. This approach falls in line with CARE’s Rights Based principle to promote empowerment.

***L) Total budget***

The budget below presents the total programme budget:

<b>RWANDA</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	3 533	3 727	3 533	3 533	3 533
CARE Norway (matching funds)	363	383	363	363	363
To be secured	471	2 566	2 710	2 736	2 301
<b>Total programme</b>	<b>4 368</b>	<b>6 677</b>	<b>6 607</b>	<b>6 633</b>	<b>6 198</b>

<sup>49</sup> 2004, MIGEPROF / USAID national research on GBV

**VII-PROGRAMME PLANS FOR CARE TANZANIA**  
**Women’s and Girls Empowerment Programme (WAGE) – PHASE II**

## 2.1 Situation Analysis

*An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient’s thematic areas*

Tanzania remains one of the poorest countries in Africa, ranking 159 out of 177 countries on the Human Development Index for 2007/2008. While poverty and underdevelopment is a reality of life for many Tanzanians, women and children are particularly disadvantaged. Customs and traditions associated with the patriarchal system lead to male bias in assignment to positions of power, decision-making, access to information, ownership of assets and allocation of resources at family, household and community level. The cumulative result is that women have fewer capital assets, less income, and are more vulnerable to impoverishment. Furthermore, girls are more likely to be withdrawn from school in case of poverty or other crises in the family and may also drop out due to pregnancy and/or early marriage. Poor family economic conditions also compel girls to migrate to cities as domestic workers, engage in risky behaviour such as prostitution making them susceptible to abuse and contracting sexually transmitted diseases including HIV and AIDS.

Tanzania’s National Strategy for Growth and Reduction of Poverty, popularly known as MKUKUTA<sup>50</sup> outlines the strategic directions and development priorities of the Government of Tanzania. It is designed to contribute towards achieving the national development vision of ‘high and shared growth, high quality livelihood, peace, stability and unity, good governance, high quality education and international competitiveness.’ MKUKUTA recognizes imbalances in gender relations as a factor impacting on income - and non income poverty. It acknowledges that gender biases in favour of men reduces the income earning potential of women and that addressing these biases is critical. A recent Gender Profile of Tanzania shows significant progress in the formulation of policies and strategies for creating an enabling environment for gender equity. However, the main beneficiaries of improvements in gender equity tend to be educated and powerful women in urban areas.

Tanzania has achieved some milestones in reform of local government and decentralisation of government administration. These include increased public consultation in budgetary planning processes such as the Medium Term Expenditure Framework (MTEF), the Public Expenditure Review (PER) and the adoption of the principle of gender budgeting in the Annual Budget Guidelines. A significant development is the adoption of participatory planning approaches for the Opportunities and Obstacle for Development (O&OD), which is the framework to be used to develop national plans and budgets from the grassroots up. The O&OD approach involves women and men meeting together for planning sessions at the village and ward level to collectively develop their key priorities and required resources. The village and ward plans are consolidated at the district level into district plans which subsequently feed into the regional and national level plans. There is a long way to go in terms of implementation but there are emerging examples of successful planning processes which have managed to incorporate the views of women and men from the local level.

A situational analysis conducted by the WAGE I programme in 2006-2007 in six districts<sup>51</sup> of Tanzania confirms the disadvantaged position of women and girls. Specifically the study revealed a high level of illiteracy among adult women, high school dropouts rates for girls, inequitable access to and control over natural resources and household assets, disproportionate burden of managing long term care in the household and poor access to quality water and sanitation services. This situation was the result of a variety of factors including priority given to boys’ education over that of girls,

<sup>50</sup> MKUKUTA is a Swahili acronym meaning Mkakati wa Kukuza Uchumi na Kupunguza Umaskini Tanzania

<sup>51</sup> Wete, Kinondoni, Magu, Missungwi, Kahama, Kigoma

traditional and cultural beliefs and practices that limit women's in decision making, limited community social support for women and girls, low access to financial services (savings and credit) and low priority given by local government to issues important for women and girls'.

There is a growing concern about the impact of climate change and food crisis world wide. The negative impact of changing climatic condition is likely to be more serious in the developing countries and Tanzania is not an exception. In rural Tanzania, the impact has already been felt by the local communities (e.g., shortage of water, both for drinking and irrigation, incidence of insect pest causing lower food production, increased malaria in places where malaria was not an issue due to global warming, etc.). The resulting consequences of climate change and food crisis is likely to impact the poor and vulnerable groups in Tanzania, especially women and girls.

Although the focus of WAGE II programme is not the climate change as such, the programme will make every effort to integrate climate change phenomenon into the programme to help poor and vulnerable communities in Tanzania, especially women and girls to better understand and prepare themselves to adapt or cope with changing climatic conditions. The WAGE II programme will create greater awareness among the local communities and leaders through awareness campaign and support them to build their capacity to advocate at the national levels through their existing and new networks. The programme will also assist local communities and leaders to better analyze vulnerability and support them to develop and implement local plans for climate change adaptation. CARE in Tanzania is currently embarking series of initiatives focused on both climate change adaptation and mitigation. These initiatives will be integrated within the broader WAGE II programme to generate synergies and programme impact.

## 2.2 Programme Presentation

### *A) Development Goal*

**Development goal:** Poor and marginalized women and girls in six districts<sup>52</sup> of Tanzania experience improved Social, Economic and Political status by 2013.

### *B) Programme Goal*

**Programme goal:** Key players<sup>53</sup> in six districts of Tanzania managing gender sensitive approaches to development by 2013

#### **Key Performance Indicators:**

- i. Quality of women's participation in decision making processes
- ii. Equity in service delivery
- iii. Balanced use and management of resources at district level
- iv. Level of community support for women's economic activities

The WAGE II programme theory of change is informed by the CARE's Empowerment Framework<sup>54</sup>, which defines empowerment as the expansion of assets and capabilities of poor people to participate in, negotiate with, influence, control, and hold accountable the institutions that affect their lives. The programme also draws from feminist theory, which defines women's empowerment as "the expansion in [women's] ability to make strategic life choices in a context where this ability was previously denied to them". Empowerment is conceptualized as both process and outcome that comprises three interrelated dimensions: Agency, Structure and Relationships. Against this framework, the programme is based on the hypothesis that for the empowerment of marginalized women and girls to occur

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<sup>52</sup> Wete, Kinondoni, Magu, Missungwi, Kahama, Kigoma

<sup>53</sup> Key players refer to women and girls, men and boys, local leaders, and local partner NGOs.

<sup>54</sup> See point 1.2n.

significant improvement in all three dimensions of empowerment, agency, structure and relationships in needed. Within the specific context of WAGE this means (i) developing individual and collective capacity of marginalized women and girls; (ii) facilitating equitable relations between men and women at household and community level; and (iii) facilitating the creation of a supportive institutional environment for women and girls to achieve their aspirations. Specifically, this requires strengthening the capacity of marginalized women and girls for collective analysis, decision making and action; strengthening women's economic position through investments; engendering community support for marginalized women and girls through critical reflection on gender roles and relationships; engaging men and boys as social change agents and promoting positive images of masculinity and behaviour towards women and girls; addressing gender inequities in decision making and service delivery; and promoting good governance at village, ward and district levels<sup>55</sup>.

### ***C) Impact Group***

The impact group of the programme will be poor and marginalized rural women and girls. The programme estimates reaching approximately 351,000 poor and marginalized rural population, of which over 70% (270,000) will be poor and marginalized women and girls over the period of five years. Further breakdown of the population to be reached by the program is as follows:

- poor and marginalized women and girls, as impact group
- Men, boys and women, especially mother in-laws (who often perpetuate stereotyped gender behaviours and roles at household and community level), as target groups
- Local leaders, partners and government authorities in the six programme districts, as stakeholders.

### ***D) Expected results***

**Expected outcome 1:** Poor and marginalized women and girls are organized, acting and advocating for enhanced gender equality

- i. # of women and girls' membership of savings and loan groups
- ii. % of women who report meaningful participation in decision making bodies at the community level.
- iii. Level of women and girls' participation in community advocacy/ awareness campaigns related to gender roles and norms
- iv. # of women and girls engaged in profitable income generating activities

### **Expected outputs:**

- 1) Skills and leadership capacities of all animators strengthened
  - i. # of animators and community resource persons trained and delivering services at the community level
- 2) Women and girls' capacity to produce and market quality market driven products enhanced
  - i. # of women and girls who are able to articulate the basics of Selection, Planning and Management of income generating activities
  - ii. # of women and girls trained in producing and marketing quality products

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<sup>55</sup> Programme indicators (including those outlined under 2.2.d) have been selected to allow measurement of qualitative and quantitative changes occurring as a result of programme implementation. These indicators draw from previous work by other practitioners working on women's empowerment. In view of the process orientation of WAGE II, indicators are largely qualitative. It should be mentioned that these indicators are indicative at present and will be refined and finalized through a participatory process with programme target groups, beneficiaries and partners. This process will also include a baseline, where necessary (i.e. where data from the district situations analysis, undertaken under WAGE I, are insufficient).

- 3) Capacity of poor and marginalized women and girls to engage meaningfully in policy engagement enhanced
- i. # of issues identified and advocated by women and girls with village and ward leadership

**Expected outcome 2:** Informal social community network systems are supporting gender equality at household and community level

- i. # of men and boys actively supporting women and girls' empowerment
- ii. Increased representation of marginalized women and girls in community development committees.
- iii. Gender stereotypes and discriminatory attitudes towards women and girls at household and community level decreased
- iv. Marginalized women and girls accessing community support in times of hardship<sup>56</sup>

**Expected Outputs:**

- 1) Increased dialogue among men and women, boys and girls around issues related to gender equality
  - i. # of meetings held between men and women, and boys and girls
  - ii. # of gender equality issues dialogued constructively among these groups
- 2) Increased community awareness and appreciation of the importance of supporting women and girls' rights in the target communities
  - i. # of community members who are able to articulate women and girls' rights.
- 3) Men and boy role models identified and their capacity built to serve as agents of change in the communities.
  - i. # of men and boys who are identified as social change agents in the target communities
  - ii. # and type of trainings/ capacity building conducted .

**Expected outcome 3:** Local decision makers and institutions are using participatory gender sensitive approaches to development planning and budgeting

- i. Representation of women and men in village planning, budgeting and monitoring processes
- ii. Village and ward plans and budgets that reflect priorities of marginalized women and girls
- iii. Gender sensitive district level plans and budgets

**Expected outputs:**

- 1) Increased understanding and appreciation by local leaders of the issues that constrain poor and marginalized women and girls.
  - i. # of meetings held between CARE staff, partners, local leaders and community members
  - ii. # and type of plans developed and implemented to address issues constraining women and girls.
- 2) Knowledge and skills of local leaders in policy analysis, planning, budgeting, monitoring and evaluation enhanced
  - i. # of local leaders trained in policy analysis, planning, budgeting, monitoring and evaluation
  - ii. # of local leaders that are able to explain the basic concepts of policy analysis, planning, budgeting, monitoring and evaluation
- 3) Fora for enabling interaction and discussion between women and local leaders created.
  - i. # of fora established and functioning
  - ii. # of key decision makers participating in the various fora

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<sup>56</sup> Outcomes of gender based violence, natural calamities etc

**Expected outcome 4:** WAGE contributes to learning and action on women and girls' empowerment and gender equality at local and national levels

- i. WAGE staff actively participating in gender networks at the national level
- ii. # of emerging women empowerment and gender equality issues from the target communities shared with relevant national stakeholders and networks<sup>57</sup>
- iii. # and type of advocacy initiatives initiated/supported by the programme
- iv. # of partners and representatives of target groups engaging in national level gender networks and advocacy campaigns.
- v. WAGE II positively influencing CARE Tanzania's strategic plan and programming making them more gender sensitive.

**Expected Outputs:**

- 1) Gender sensitive Programme Monitoring, Evaluation and Learning strategy developed
  - i. CO gender audit and gender strategy developed and disseminated
  - ii. Gender sensitive Programme Information management system developed
- 2) Human interest stories, best practices and change processes documented and shared
  - i. # of human interest/ success stories documented
  - ii. Frequency of CARE and partner staff participation in gender alliances, networks and forums to cross-fertilize learning
- 3) CARE and partner staff capacity in policy analysis and advocacy enhanced
  - i. # of CARE and partner staff trained in policy analysis and advocacy
- 4) Programme Governance Committee established.
  - i. # of PGC meetings held

***E) Anticipated Risks***

***An assessment of anticipated risks and how these may be countered***

**Limited resources and service delivery capacity at the level of local government:**

The pursued liberal democracy, the open and competitive economic system and tentative devolution of power that has resulted from the Government of Tanzania's decentralization and local government reform efforts is the backdrop against which all development is undertaken in Tanzania. The limited resources and service delivery capacities of the government, especially at the local level, are recognized. This will create or deepen negative perceptions about the government on the part of poor and marginalized women and girls, particularly concerning government transparency, accountability and responsiveness towards gender commitments and issues that affect negatively the poor and marginalized women and girls. This will impact negatively on the programme as a positive perception about government is critical for generating confidence among women and girls that the programme will achieve the purpose for which it was established and translate into economic and social empowerment of women and girls. It is however expected that even if government resources are not forthcoming, civil society organizations in partnership with the target communities, will be able to access alternative sources of resources and services to meet some of their needs. Moreover, it is anticipated that with deepening of the decentralization process and additional resources available to the government through Direct Budget Support system (a result of the Paris High Level meeting on Aid Effectiveness) local government resource and technical capacity will improve in the medium to long term.

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<sup>57</sup> These include Health Equity Group, the Men Engage Tanzania network, TAWASANET, TGNP and others as appropriate

The programme is designed to influence resource allocation and prioritization of issues affecting women and girls (Outcome 3) for local decision makers using planning and policy processes to deliver on gender and poverty commitments to:

- Increase understanding and appreciation of the issues that constrain women and girls empowerment
- Respond to communities' demands in terms of improved capacity to deliver services
- Increase their knowledge in policy analysis, planning, budgeting, implementation, monitoring and evaluation of priority issues affecting poor and marginalized women and girls

### **Communities' stigmatization of men and boys championing women and girls' empowerment**

In the absence of men and boys' active support, the programme's achievement of fundamental *relational* and *structural* change will be hampered. Without this is envisaged that the programme may only be able to ensure appreciable success in areas of improving women and girls' *agency*<sup>58</sup>. However, there is an apprehension that some men and boys in fear of ridicule might be reluctant to support the empowerment of women and girls. In order to address this, the programme will undertake various activities at community level both sensitizing on the importance of gender quality as well as promoting positive masculinity.

### **Deepening social exclusion due to the inability of the ultra poor to participate in the programme, especially through VSL groups**

The savings and loan group approach, besides being an effective methodology for mobilizing women to generate social and economic capital, can also create an extra gap between the haves and the have-nots in communities. It is however expected that the community animators will play a major role in devising mechanisms of reaching the poorest of the poor.

The programme will mitigate this risk through community animators who have their finger on the pulse of things and understand the needs of rural communities especially the poor and excluded women and girls. They will assess opportunities that will suit these ultra poor and marginalized women and girls from an integrated perspective. Animators will act as a go-between amongst the various groups and bodies involved in community management and decision making ensuring the views of poor and marginalized women and girls who can not participate in the savings and loan groups.

### **Failure of individual or group businesses or investments**

Business failure results in lower household income and loss of confidence among the poor and marginalized women and girls. This is propelled by women producing goods that are not marketable. The programme is designed to provide skills in entrepreneurship and enhancing the capacity of women and girls to produce quality market driven products. A sub sector analysis will also be done to identify products that are market driven and link women to such markets.

### **Lack of enabling environment for gender equality**

Tanzania has participated and committed itself to the agreements in all the four World Conferences on Women. It has made significant progress towards creating an enabling environment for gender equality. Limited implementation of these strategies and policies is recognized and can pose a risk to the programme. The Government of Tanzania realizes the weakness in implementation and monitoring of the strategies and policies for advancing gender equality. It is however expected, through the Local Government Reform Programme II, those strategies and policies will become functional.

The programme will mitigate this risk through advocacy initiatives done by the community animators and Civil Society Organizations. Collaborative working relationships will be built with national and local government authorities for policy analysis and implementation. Furthermore, issue affecting the poor and marginalized women and girls from the micro level will be linked to the macro level for creating a collective voice in creating enabling environment for gender equity.

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<sup>58</sup> Refer to CARE Empowerment Framework under 1.2.n.

***F) Relevance to Donors and Recipient Authorities***

***An analysis of the relationship to other donors, recipient authorities and their official plans and goals***

At the national level, WAGE II is informed by the development priorities of the Government of Tanzania as enshrined in the MKUKUTA. The programme design takes into account Tanzania's considerable progress in building an enabling environment for gender equality in the adoption of progressive policies, increased female leadership and an opening up of the policy space.

WAGE II will actively seek to link with other supporting initiatives in its areas of operation, particularly those within the plans of local government. This is particularly related to the Local Government Decentralization Programme II, which focuses on Decentralization by Devolution. The programme will actively promote effective linkages between women and girls, and the issues they prioritize, and the business of local government as expressed from village-level decision-making up through to district level comprehensive plans which are the primary place where resource allocation takes place.

Achieving the goals of WAGE II also requires collaboration with other civil society actors who are engaged with women's empowerment issues. In addition to formal partnerships with implementing partners, the programme will establish collaborative working relations with a variety of organizations including national level NGOs, local government authorities, and research institutions. These relationships will contribute technical expertise related to gender issues, networking, constituency building as well as filling in information gaps. WAGE will collaborate with organizations such as the Tanzania Gender Networking Programme (TGNP), Health Equity Group, the Men Engage Tanzania Network, the Tanzania Gender Network, etc. The programme will also use its advocacy links to strengthen newer, less experienced, organizations so the overall national strength in regard to advocacy is increased, thus reducing the heavy demands on the few well-known civil society groups.

WAGE II will also explore opportunities for collaboration with Norwegian organizations operating in Tanzania. These include Norwegian People's Aid involved in refugee-related work in western Tanzania, and Norwegian Church Aid. Though both organizations work outside WAGE II operational areas, CARE will ensure they know of the WAGE programme so as to facilitate collaboration should the possibility arise. The Norwegian People's Aid is an active member of the Policy Forum, as is CARE. The WAGE II programme will also collaborate with the Norwegian Embassy in Dar es Salaam on various relevant activities as the opportunity arises.

***G) Grant Recipient's Added Value***

***An assessment of the Grant Recipient's contributions to local partners other than financial assistance – in other words what is the added value of the Grant Recipient***

At the local level, WAGE II will be implemented through formal partnerships, based on negotiated Memoranda of Understanding with six district based NGOs<sup>59</sup>. CARE's role in these NGO partnerships will in addition to providing sub-grants include capacity building (financial management, policy analysis and advocacy, monitoring and evaluation, fund raising, animation as well as gender) for implementation of approved activities that contribute to delivery of WAGE II outputs and achieving the programme objectives, facilitation of linkages to local and international networks, and information and knowledge sharing.

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<sup>59</sup> See 2.2.h.

WAGE will also work in alliance with a wider range of different organisations, including local authorities, relevant Ministries and NGOs working at the national level. CARE's contribution to these working relationships is mostly linked to coordination activities, exchange of information and provision of feedback.

#### *H) Local Partner Organizations*

##### *An analysis of whom the local partner organisations represent and their role/strengths in civil society*

Civil society is a relatively new concept in Tanzania and is a product of the liberalisation of the 1990s. There has been a fast growth in the number of civil society organizations (CSOs) ranging from organizations such as NGOs, District Development Trusts, religious organizations, to interest organizations such as community based organizations, trade unions and high profile advocacy groups. In principle civil society is expected to play a significant role in the democratization process specifically by providing arenas for citizens to engage in discussion of issues of concern to them and to hold governments accountable. The reality however in Tanzania is that many CSOs lack the capacity or motivation to play this watchdog role effectively due to low educational levels of staff and/or members, insufficient resources, a lack of clear vision and mission and understanding of their potential to contribute to good governance and accountability. Many CSOs/NGOs in practice behave more as 'contractors' accountable to donors for delivering certain outputs (safety nets, services, pieces of research or advocacy) rather than as agents for promoting government accountability. In some cases establishing an NGO is seen as a (private) income generating opportunity - often in the face of retirement or retrenchment from formal sector employment. There is also a shortage of skills amongst many civil society actors, both in running their organisations (financial management, strategic planning, monitoring etc) and in understanding the context within which they operate. The result is that relatively few CSOs, typically elite based advocacy organizations play an assertive role in demand side accountability.

Based on this background, WAGE II will focus on partnering with six district NGOs. These will serve as the primary interface between the programme and the target groups. They will have responsibility for community mobilization, awareness raising and advocacy among others. Added value of NGO partners includes bringing their understanding of rural community needs to bear on programme implementation, acceptability in target communities and enabling wider programme coverage (reaching more marginalized women and girls).

##### **Ngezi Vumawimbi Natural Resources Conservation Organization (NGENARECO) - Pemba**

NGENARECO is an umbrella organization for 10 Villages Conservation Committees (VCCs) around Ngezi – Vumawimbi Natural Forest Reserve on Pemba. NGENARECO focuses on the management and conservation of natural resources in Ngezi – Vumawimbi area, increasing environmental awareness including coastal and marine environment and improving the capacity of the community to secure their livelihood.

NGENARECO has been collaborating with CARE since 2004 in a project on sustainable conservation of natural resources and improvement of community livelihood around Ngezi – Vumawimbi area. Since 2006, NGENARECO has also been collaborating with CARE in the implementation of WAGE I. During this period the organization has been involved in various activities related to conservation, livelihood and education. This will continue in WAGE II.

**Development and Life Relief Association (DELIRA) - Kahama**

Development and Life Relief Association (DELIRA) is a registered non-governmental organization that aims to reduce poverty in Tanzania. DELIRA was established 2000 as a Community Based Organization operating in Ngara District in Kagera Region. Its intention was to run interventions geared at alleviation of poverty through community development interventions, conservation of the environment through community based approaches, fighting against the scourge of HIV and AIDS, illiteracy, general services delivery and relief to the community with a particular emphasis on the disadvantaged groups of people. To date, the organization has grown and expanded in terms of scope and areas of focus, including both relief work and community development activities.

The organization has been collaborating with CARE since 2007 to implement some of the activities related to advocacy and capacity building within the WAGE I programme in Kahama District. This will continue in WAGE II.

**Human Advancement and Creativity House (HACH) – Kinondoni**

HACH started its operations as a non-profit making organization in the second quarter of the year 2000. HACH is an organization composed of Tanzanian professionals. It aims to make a contribution to the development nation-wide, especially by providing training and advisory services in the civil society sector and enterprise development. Its strategies focus on the practical promotion and application of gender equality, equity and women and girls as well as boys and young men empowerment objectives through policy advocacy, dissemination of entrepreneurship development skills and mainstreaming gender pro-poor perspectives at all decision making levels in the civil and public sectors.

HACH has been partner with CARE since 2001 in various projects. The major focus has been to support vulnerable groups (girls and women as well as boys and young men) to develop sustainable livelihood strategies and empowerment of local government authorities on adaptation and replication of best practices. HACH will continue to collaborate with CARE in WAGE II.

**Kigoma Development Promotion Agency (KDPA) - Kigoma**

KDPA has been a registered NGO since 1998. It is a voluntary, non-profit, non-partisan organization, facilitating and implementing local developmental activities. It is also a networking trust; working with organizations of common interest for the sake of achieving its purpose, mission and goals. It has been working in Kigoma region since its formation and has experience and capacity of working in the local community with mobilization, sensitization, lobbying and advocacy work. Since 2007, KDPA has been collaborating with WAGE Kigoma in implementation of some activities related to advocacy and training of local leaders. This type of collaboration is intended to continue in WAGE II.

**Kivulini – Mwanza**

Kivulini Women's Rights Organization is a registered non-governmental organization based in Mwanza, Tanzania. Kivulini advocates for women's and girl's rights in Tanzania by emphasizing the prevention of domestic violence against women and girls. The Kiswahili word Kivulini means "in the shade". It implies a place of safety, under a tree or otherwise, where people meet for discussions and offer support to one another. Kivulini was established in 1999 to create opportunities for community members to come together, talk, organize and work towards preventing domestic violence so that women and girls are able to enjoy their rights as stipulated in the Constitution of The United Republic of Tanzania, African Charter and various human rights conventions. The Kivulini mission affirms the values of democratic governance, human rights, gender equity and meaningful public participation in decision-making.

Kivulini has been collaborating with CARE in the WAGE I programme in Mwanza region since 2006. Kivulini has been the leader in bringing community members together to advocate for human rights (particularly women's rights).

At the national level, there are however a number of strong and visible Civil Society Organisations at the forefront of lobbying for gender equality and equity<sup>60</sup>. The intention for collaboration at this level will range from technical input into various aspects like gender, legal advice for women, research and media to networking and advocacy. Moreover, working with these organisation will facilitate that evidence from the field (community and district level) will be linked to the national level efforts done by the programme and the identified partners and networks. On the other hand, relevant information related to policies, reviews and the like will be shared with the communities through the same channel and hence enabling the lower level to channel their input through the same course.

### ***I) Contribution to Civil Society***

#### ***An analysis of how the programme contributes to strengthening civil society***

Through capacity building and experiences gained from taking part in the programme planning, implementation and monitoring, the 6 district NGOs are expected to expand their competence and capacity both which will both increase their internal governance and accountability, as well as enhancing their ability to take a more active watch dog role, and thus being able to hold the local and national authorities accountable.

The VSLs contribute an avenue for women and girls to come together to discuss and address issues of concern to them. The members benefit from a package of capacity strengthening through training on the roles and responsibilities of their members in the functioning of the organisation, the associative life, healthy management and participation in communal life. These organisations constitute today veritable learning laboratories of democracy and active citizenship. Moreover, the groups are important entry points for skills building activities on a range of competencies identified as critical for building women's confidence and capacity to approach village and/or district leadership about their concerns and request for action to be taken to address these, and thus being able to take part in the bottom-up approach to local planning which is an integral part of the local government reform in Tanzania.

### ***J) Women's rights, Equality, and the Environment***

#### ***A description of how women's rights and equality and climate and environmental concerns are attended to in the programme***

See Part 1.2.N for a general response to this question.

### ***K) Sustainability***

#### ***Plans for phasing out the programme and ensuring sustainability (after the agreement period)***

WAGE II is committed to meaningful participation and ensuring that programme implementing partners and beneficiaries are at the centre of driving change. This involves a slow and sometimes difficult process and requires a long-term commitment to programme communities. The thrust to put implementing partners in the driving seat as well as building a cadre of natural leaders in the community with improved links to relevant decision makers will be a carefully managed process, designed to ensure that empowerment initiatives and outcomes continue beyond the lifetime of WAGE II. The programme exit plan will be developed in consultation with implementing partners and community animators.

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<sup>60</sup> For example Tanzania Media Women's Association (TAMWA), Tanzania Gender Networking Programme (TGNP), Tanzania Women Lawyers' Association (TAWLA) and Women's Legal Aid Centre (WLAC)

***L) Total budget***

At the offset WAGE II will be entirely funded by CARE Norway and Norad. However, CARE is implementing other similar projects funded through other mechanisms in the same geographical area as WAGE. A recently established Women’s Empowerment and Microfinance Sector in CARE Tanzania brings all these initiatives under one common management. As part of CARE Tanzania’s move towards a programmatic approach, this provides opportunities to develop a common women’s empowerment strategy, maximizing synergy, expertise and resources available. WAGE is one of the two largest programmes under this sector and is in a strategic position to contribute learning regarding successful strategies for achieving and measuring women’s empowerment.

The budget below presents the total programme budget:

<b>TANZANIA</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	6 346	6 346	6 346	6 346	6 346
CARE Norway (matching funds)	653	653	653	653	653
To be secured	686	4 638	4 577	3 125	3 318
<b>Total programme</b>	<b>7 685</b>	<b>11 637</b>	<b>11 576</b>	<b>10 124</b>	<b>10 317</b>

## VIII- PROGRAMME PLANS FOR CARE UGANDA

### ROCO KWO – Socio-economic transformation of communities affected by conflict in ACHOLI sub-region

#### 2.1 Situation Analysis

*An analysis of the situation in the country and an assessment of national priorities with an emphasis on the Grant Recipient's thematic areas*

From 1997-2005 over 1.7 million people in Northern Uganda were displaced from their homes and communities and have relocated to 'protected'/Internally Displaced Persons (IDP) camps as a result of conflict between the Government of Uganda (GoU) and Lords Resistance Army (LRA). During this time, there were widespread human rights violations, and individuals endured ongoing armed - and gender-based violence and a breakdown of livelihood structures. The mass displacement, led to the destruction of social, cultural, economic and political infrastructure. According to the Uganda Consolidated Appeals Process (2007), over 458 500 persons - 87% of the total population of Gulu, Kitgum Pader and Amuru were IDPs and the majority was living in camps (CAP, 2007 UNOCHA).

Since 2006, the GoU and LRA have engaged in a peaceful dialogue to end the two decade conflict in Northern Uganda. The "Juba peace talks" have already produced promising results. According to the recent camp monitoring report from UNHCR, as of March 2009, approximately 80% of the IDPs have now moved from the camps to de-congestion sites or to their homes. The same report states that a sizeable number of the IDPs are now accessing land for cultivation.

While there are some promising signs of hope, the impact from decades of unrest have taken a heavy toll on Northern Uganda, particularly on the people of Acholi sub-region. Key social indicators bear this out:

- Northern Uganda has about 61% of its population living below the poverty line as compared to 31% nationwide.
- While HIV prevalence in Uganda is currently at 7.1%, prevalence is highest in Northern Uganda, with 10.5% for women and 8% for men
- Infant mortality in the Northern Uganda is at (172/1 000), Under Five Mortality (250/1 000) and Maternal Mortality (700/10 000). These figures are worrying and are among the worst in Africa.

The above statistics represent a very worrying situation for human conditions and sustainable livelihoods, particularly for women who have been seriously affected by the pro-longed conflict. In fact, the Juba Peace talks that seem to have been the centre of hopes for people have systematically neglected discussions on specific women concerns. Moreover, at the start of the talks, only one woman was at the peace negotiation table. This state of affair suggests a general lack of will by both parties to involve women and articulate their issues. Yet, for sustainable peace, improved livelihoods and social protection inclusion of women's voices, concerns and their active participation in articulating this is paramount.

The GoU recognizes conflict as one of the root causes of poverty. Following a review of the Poverty Eradication Action Plan (PEAP) in 2003, it was recognized that sustained development could only be attained when issues relating to security, conflict and disaster are given priority. The government is currently reviewing the PEAP and is in the process of developing the National Development Plan (NDP). One of the major regional development plans has been the Peace Recovery and Development Plan (PRDP) for Northern Uganda. The PRDP is so far the most comprehensive framework to address post-Juba issues, including; the return and re-integration of former combatants, justice and reconciliation and post conflict recovery for the communities. The capacity to operationalize the

PRDP framework at various levels is however still extremely limited. This programme is particularly developed to support the PRDP's effort to support the shift from emergency relief to long term peace building and development in Northern Uganda.

Uganda has ratified a number of international (human rights) instruments like the CEDAW. Gradually Uganda has made a number of national policy adjustments, including the constitution (1995) and the National Gender Policy (1997) that guarantees women's rights and their advancement and equality before the law. Nevertheless, gender disparities persist due to inadequate enforcement of existing laws, low educational levels, illiteracy, harmful cultural practices, limited access to resources and weak institutional capacity to address gender imbalances.

## 2.2 Programme Presentation

### A) Development Goal

**Development goal:** Conflict transformation, stability and social-economic development in northern Uganda<sup>61</sup>.

### B) Programme Goal

**Programme goal:** By 2013 communities affected by conflict in Acholi sub-region will have transformed their lives through economic empowerment, increased participation of women in decision making at all levels and protection of the most vulnerable in the community.

- i. % of target community who has moved above poverty line
- ii. X % increase in # of women in leadership positions
- iii. X % increase in # of women involved in decision making processes at household level

In general terms, this programme aims at improving the economic self reliance, involvement of women in peace processes and coping mechanisms of the people recovering from conflict (both those living in camps and returnees) in the Northern Uganda districts of Gulu, Pader, Kitgum and Amuru. Programme activities will address three areas in particular; economic empowerment, social protection and safety regarding sexual and gender based violence affecting women and girls and women participation in peace processes, particularly at the official level.

### C) Target group

The primary impact group of the programme include 45 000<sup>62</sup> people affected by conflict, of which at least 70% will be women and girls. As the average household size in Northern Uganda is 6 the ultimate beneficiaries of the programme will include about 270 000 individuals (15% of the total population that was displaced at the height of the conflict).

#### Direct target groups:

- The programme will primarily target members of Village Savings and Loan Associations (VSLs). VSL members form a social network of support for the very poor and marginalized members of the community who are in most cases dependants of individual members of the VSL group. The very poor members of the community are in most cases unable to join VSL groups partly because of lack of income to save or lack of confidence to join groups. Through

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<sup>61</sup> This goal is in line with CARE Uganda's long range strategic plan (2008-2013), our strategy specific to Northern Uganda (2008-2013), as well as the PRDP goal.

<sup>62</sup> Working in four districts (Pader, Kitgum, Gulu and Amuru), we shall be working with 1 800 savings and loan groups. Activities will include savings and loan activities, farming/and other income generating activities, conflict resolution/peace, SGBV etc. There are about 25 members per groups, giving a total of 45 000 ultimate beneficiaries.

VSL groups ROCO KWO will reach the poorest segments of the community who mainly comprise of orphans and vulnerable children, survivors of SGBV, HIV and AIDS affected and infected, formerly abducted people (women, girls, men and boys) and the elderly. Members of the VSL groups together with their families will benefit directly from sustainable livelihoods through engaging in viable economic activities, capacity building initiatives in advocacy on GBV and promoting women participation in decision making processes at all levels. The programme will put emphasis on identifying, and supporting the poorest members of the community to seek redress in case of rights violations, and start economically viable activities. Existing VSL groups will be used to reach out to the poorest members of the community.

- Leaders at various levels, especially women leaders, will benefit from skills training in advocacy, peace building and GBV prevention. Leaders and other members of the civil society will also benefit from information, analysis and experiences that will be generated through a holistic and bottom-up approach to social-economic recovery that is privileged by the programme in Acholi sub-region.
- Community members who are not part of the VSL groups will also be targeted indirectly through community sensitisation programmes.

#### ***D) Expected results***

##### **Expected Outcome 1:**

People recovering from conflict, especially women, will have improved and sustained their economic livelihoods

- i. % of households registering an increased income
- ii. % of women registering an increase in access and control of productive assets
- iii. % increase in the level of savings at the household level

##### **Expected Outputs:**

1) Agricultural productivity of conflict affected households increased

- i. % of households accessing quality seeds
- ii. # of acres under cultivation
- iii. % households reporting an increase in yield

2) Access to information and markets for agricultural outputs by farming groups improved

- i. # of marketing associations and linkages formed
- ii. % increase in income from sale of agricultural outputs
- iii. % of households accessing markets for agricultural products

3) Improved agronomic practices of farming groups through demonstration

- i. # of demonstration plots set
- ii. % of farmers adopting improved farming techniques
- iii. # of farming groups established

4) Mobilisation of pro-poor savings and investment mechanisms of 1 800 groups promoted

- i. # of participating community groups in savings and loans associations
- ii. # of community groups trained in business management skills
- iii. # of viable and profitable business initiated and sustained

##### **Expected Outcome 2:**

Enhanced peaceful coexistence and participation of women in decision making at all levels

- i. % of women in leadership positions at various levels
- ii. # of women peace networks in Northern Uganda
- iii. Issues of special concern to women being discussed in the Juba peace talks

**Expected Outputs:**

- 1) Capacity of women, peace community based organisations and local leaders in conflict resolution enhanced
  - i. # of trainings in advocacy skills conducted
  - ii. # of trainings of cultural and religious leaders conducted
  - iii. # of women demonstrating peace building skills in the communities
  
- 2) Advocacy at the local, national, regional and international level in the implementation of the UN Resolution 1325 increased
  - i. # of IEC materials produced
  - ii. # of radio talk shows and spot messages aired on radio
  - iii. # of position papers produced and discussed
  - iv. # of policies influenced at various levels
  
- 3) Research, documentation and networking on women’s participation in peace building enhanced
  - i. # of exchange visits conducted
  - ii. # of networks and linkages of women’s organisations created and sustained

**Expected Outcome 3:**

Women in Acholi sub-region, especially the very poor, are able to access justice and advocate for the protection of their rights

- i. % of women who have reported cases of SGBV to the justice and law sector
- ii. % of women who have access to quality and effective post SGBV services
- iii. % of SGBV survivors who have been supported to engage income generating activities, VSL and farming
- iv. % of the chronically poor who have access to financial and agribusiness services

**Expected Outputs:**

- 1) Sustainable community based structures and mechanisms strengthened and supported to prevent and effectively respond to SGBV, in 12 sub-counties
  - i. Strategies for SGBV prevention developed and implemented
  - ii. # of community structures with effective SGBV prevention and response strategies developed and being followed.
  - iii. Functional community structures supporting SGBV case management
  
- 2) SGBV is generally perceived and sanctioned as unacceptable behaviour in the Acholi sub-region and re-integration of survivors of SGBV is promoted in 12 sub-counties
  - i. # of anti SGBV community movement groups formed (Kacel)
  - ii. # of men actively participating in SGBV prevention and response initiatives
  - iii. # of advocacy issues taken on by the RWOT institution relating to gender inequality.
  
- 3) Improved survivor access to appropriate and timely post SGBV service in 12 sub-counties
  - i. # of persons accessing post exposure services within 72 hours
  - ii. # of services providers trained and providing services to survivors
  - iii. # of site specific referral pathways established and effectively functioning
  
- 4) Improved monitoring, reporting and documentation of SGBV cases in 12 sub-counties
  - i. # of cases being reported and referred to counselling units by the monitoring team
  - ii. # of health units and sub county offices with effective data management system

***E) Anticipated Risks***

***Assessment of anticipated risks and how these may be countered***

**Internal:** There is a likelihood of most implementing and partner staffs to continue hanging on the philosophy and operational principles of project approach rather than adopting a quick shift to programme intervention. The questions are, how prepared are we to go programme approach and are we really shifting our thinking and orientating ourselves along that direction? Staff capacity to conduct organization development is still limited and also working with partners under the programme arrangement, which may require specific skills in organizational development and long-term experience working with partners.

CARE Uganda has not yet developed a coherent monitoring and evaluation (M&E) system to be able to monitor and track programme outcome and impact. A full orientation of all staff in CARE and partners on this move from project to programme has been planned. Here a common understanding and appreciation of the move will be promoted. Furthermore, staff (partner and CARE) will be trained in organizational development processes and CARE Uganda is also in the process of further developing its M&E capacity. An M&E coordinator has already been hired to take lead in this.

**External:**

**Land disputes:**

Recently there has been a growing conflict over land in Acholi Sub-region. Families, clans and communities have been engaged in serious land disputes as people return back to their homes. The main cause of land wrangle in Acholi is related to confusion over boundaries, increasing value of lands and in general, the fact that land tenure systems are increasingly becoming politicized. Originally, many Acholi people acquired lands through gifts and goodwill from land owners, however, now that most of these givers have died, their family members no longer recognize the previous transactions. They are fighting to acquire back lands that were previously given away or hindering people to settle in this kind of land. This has brought serious land disputes over the entire Acholi land. The consequence of this conflict may lead to landlessness, hatred, violence and displacement.

CARE intends to use this programme, particularly the peace building and conflict resolution component to address community conflicts and improve relationship for harmonious co-existence. The implementation of the UNSR1325 will engaged women and local leaders to sensitize the masses about land disputes and will encourage communities to engage in dialogue to resolve conflicts among themselves.

**The effects of global warming:**

From the experience of 2007, the effect of climate change in the region is still anticipated to continue disturbing the Acholi sub-region. There have been periods of droughts and heavy rainfalls, which led to famine and death of animals and overflowing of rivers respectively. As a result many people have lost their animals, crops and also some were hit by epidemic such as cholera and dysentery.

CARE will strengthen its emergency programme by responding the effects of the floods and drought. To do this, CARE is recruiting a new Emergency Coordinator who will be responsible for coordinating CARE emergency programmes in the Uganda. CARE will also liaise with other organization such as Uganda Red Cross Society who is mandated by law to handle emergency in Uganda to provide an appropriate response to disaster and emergencies. With implementing partners and local government CARE will incorporate risk reduction strategy such as promoting the planting of improved seeds varieties of seeds and linking up with relevant government departments like the agriculture and production, meteorology for information sharing and setting up an early warning mechanism

**Partnerships:**

Partnership with community based organizations also constitutes a risk in ensuring quality and timely delivery of services to the target groups. Some of our partners do not have adequate capacity to carry out effective implementation of activities.

CARE will commit itself to capacity building of partners in the areas of governance, management and administration through capacity gaps identification and support. Already, in this programme we are recruiting 2 organization development programme specialists who will be able to work very closely with the partners to build their capacity in the areas of programming, planning, management, governance and administration (see also point 1.2f).

***F) Relevance to Donors and Recipient Countries***

***Analysis of the relationship to other donors, recipient authorities and their official plans and goals***

This programme builds on governmental initiatives such as the Programme for Modernization Agriculture (PMA), National Agricultural Advisory Development Services (NAADS) and will link up the Production and Commercial Departments of the four districts in the area of monitoring, technical support and coordination of livelihoods activities. The programme will also work with other peer organizations and UN agencies such as International Rescue Committee (IRC) Catholic Relief Services (CRS), Acholi Programme of the European Union, UNDP and FAO who are implementing livelihoods programmes in the area.

Particularly through its UNSCR 1325 related activities, the programme also complements the PRDP, the work of the cultural and religious institution in peace building in the region. The programme will also complement the work of Justice and Peace Commission, Acholi Religious Leaders Peace Initiative (ARLPI), Acholi Cultural Institution and various women efforts for peace building in the region particularly Res. 1325. In this work CARE and partners will be working hand in hand with the law makers and women leaders to ensure that women are involved in peace process at official levels.

The programme's response to and prevention of SGBV will complement the work already being done by the American Refugee Council (ARC), UNICEF, UNFPA, War Child Canada, Community, Health, Justice and Law, Gender Departments of the districts on responds and prevention of SGBV. The district community departments of the different districts are conducting psychosocial support; this programme builds on that.

The GoU has a policy that provides guidelines on how different stakeholders should respond to the needs and rights of IDPs during and after displacement. The policy provides a coordination framework from national to district level. To this extent, CARE participates and is a key member of the sector coordination committees on agriculture, economy, food security/livelihood and marketing. CARE also participates in other sector committee such as health and nutrition, education, water and sanitation, human rights protection and others where priorities are agreed and roles shared.

The programme is developed in consultation with the community, partners and local leaders in Northern Uganda through workshops discussions, meetings and group's discussions and interviews. During the development phase, members of the District Disaster Management Committee (DDMC) of Gulu, Amuru, Pader and Kitgum were consulted and they contributed significantly, in shaping the programme. The local leaders, technical staff, CARE and partners' staff, cultural and religious leaders were among the people consulted in two separate meetings.

The district and Sub-County local government authorities will participate in project monitoring, ensure lessons learned are shared and replicated while supporting coordination with other stakeholders in support of the project; and linking the target households to key services required for project execution; and supplementing project outcomes/providing additional required services to make the intervention more meaningful in changing livelihoods. The Commercial and Production Officers shall provide technical guidance and supervision to the economic component while the Community Services Coordinator and Gender Officer, shall support the protection against SGBV component. Supervision

visits to the community shall be planned with these officials as has been the practice. CARE will maintain active participation in relevant district sector working groups.

At the national level, the programme will consult and draw assistance from the Ministry of Finance and Economic Planning (MFPED) Micro Finance division, Ministry of Agriculture and Forestry (MAAIF), Office of the Prime Minister, Disaster Preparedness and Response and Northern Uganda Rehabilitation Programme for overall guidance on policy and technical aspects. CARE Uganda also has membership of various networks, and thematic working groups in Northern Uganda. In some cases the organization play a lead coordinating role such as in the coalition Civil Society Organization for Peace in Northern Uganda (CSOPNU). Experience and expertise from these groups will be used for proper implementation of the programme. Such relationships will be particularly important to build collective voice for advocacy work.

CARE Uganda will put in place a programme steering committee that will be responsible for providing overall programme oversight. The committee will consist of 2 representatives from community/programme participants; 1 representatives from the local government; 3 representatives from CARE; 1 representative from a partner organization.

The main purpose of the programme steering committee is advisory. The committee will discuss and suggest alternatives to the implementation strategy and work to ensure that the best alternative is always applied in the management of the programme. The committee will meet twice a year to review progress and give recommendations on how programme management can be improved. The committee thus; offers advisory service to CARE and its partners.

#### ***G) Grant Recipient's Added Value***

##### ***Assessment of the Grant Recipient's contributions to local partners other than financial***

Currently, CARE is working with, community based organizations, and faith based organizations in the region. CARE intends to build on local resources and knowledge and strengthen the capacity of the local organization in order to ensure sustainable commitment in the fight against poverty. This programme will be implemented in partnership with local organizations. CARE will provide sub grants to the partners and moreover work with them to ensure that activities are implemented according to plan. The support will include collaboration in the area of human resources management, support supervision, procurement, financial management, sub-grant management, planning, budgeting and training of partners on the key components, monitoring and evaluation. In addition to the above CARE will give technical support to the partners in implementing programme activities, when needed.

Apart from the grassroots training and capacity building workshops, regional capacity workshops, conferences and sharing sessions shall be organised. Documentation learning and sharing – consciously making sure there is continued learning and sharing in the programme- with partners and other stakeholders. Therefore, opportunities for cross learning will be created at the implementation level.

#### ***H) Local Partner Organizations***

##### ***Analysis of whom the local partner organisations represent and their role / strengths in civil society***

The programme will be implemented by 6 partner organisations in the four districts. Gulu and Amuru will have two partner organisations each, while Kitgum and Pader will have one partner organisation each. The implementing partners are G DFA, DNU, FOKAPOWA, KIWEPI, VISO and ARLPI.

**Partner 1: Gulu District Farmers Association (GDFA), will be implementing ROCO KWO program in Gulu district**

Gulu District Farmers Association (GDFA, 1992, 6,131 farmers) is the local representative of the Uganda National Farmers Federation, a civil society entity to promote rights of poor farmers of Gulu. The association has groups comprising 20 to 30 farmers, with an elected committee of nine members at sub-county and parish levels. GDFA has appropriate structures and systems for effective delivery of services to the poor in the conflict affected areas. GDFA is an implementing partner to the Northern Uganda Social Action Fund (NUSAF, a Government of Uganda project funded by the World Bank), mobilising and supporting community groups. CARE has been in cooperation with GDFA since April 2004 with a focus on promoting rural agricultural technologies.

**Partner 2: Diocese of Northern Uganda (DNU), will be implementing ROCO KWO program, in Gulu district**

DNU (1950) is a diocese of the Church of Uganda, an independent Province of the Anglican Community world wide. The Diocese has a Field Extension Staff and a Project Manager for development projects. The Church is a very strong institution within the community and hence plays a critical role in influencing both policy and people's behaviour and practices. The Diocese works also in partnership with the Government of Uganda. DNU is a partner to Catholic Relief Services (CRS) with whom they promote agricultural training in agronomy and improved technology in selected areas. CARE has worked with the DNU since April 2004 on a programme to promote pro-poor financial services, enhance agricultural production and promote agri-business skills among the war affected people of Gulu district.

**Partner 3. Forum for Kalongo Parish Women Association (FOKAPAWA): will be implementing ROCO KWO program in Pader district**

FOKAPAWA is a registered NGO based at Kalongo parish, Parabongo sub-county in Pader district. It has a board of advisers that is the supreme decision making body of the organisation. In terms of management, it is headed by a Director who is an ex-officio on the board, working with a team of five staff. FOKAPAWA was formed in 1998 to carry out its activities in the field of women's empowerment, reconciliation, justice and equal rights and income generation for education of the girl-child and orphans. Since 1998, FOKAPAWA has been engaged in the area of food security and nutrition in Wol, Parabongo, Paimol, Lapono, Patongo and Lukole sub-counties in Pader district. The organisation has so far received support from World Food Program (WFP), Food and Agricultural Organisation (FAO), the French embassy and the Italia Embassy (funds to implement a child protection program in IDP camps).

**Partner 4: Kitgum Women Peace Initiative (KIWEPI): will be implementing ROCO KWO program in Kitgum district**

This is a registered NGO with the NGO board and Kitgum Local government. The organisation was established in 2000 with the aim of mobilising grass roots women for peace building and conflict resolution. The organisation has a working constitution that guides its operations, with a fully fledged board and functional secretariat. Board member meets bi-annually to discuss policy and governance issues affecting the organisation. Meanwhile, the secretariat is headed by the program coordinator with the responsibility of direct implementation of the board decisions. KIWEPI has been supported by some church based organisation in Netherlands and International Women Tribune Center in the US to implement peace building and reconciliation programs. Recently, KIWEPI had been implementing the UNSR 1325, which funding from the center and has been implementing SGBV program in 6 sub counties in Kitgum district. They have been advocating for protection of women and children rights. These components/activities are key in the current program document.

**Partner 5: Acholi Religious Leaders Peace Initiative (ARLPI): will be implementing ROCO KWO program in Amuru district.**

The Acholi Religious Leaders' Peace Initiative (ARLPI) is an interfaith peace building and conflict transformation organization that was formed in 1997 to provide a proactive response to the conflict in Northern Uganda. It brings together religious leaders from the Muslim and Christian faiths with their

respective constituencies to participate effectively in conflict transformation. ARLPI envisions a peaceful and prosperous country where people strive to co-exist harmoniously to promote the spirit of national unity with a goal of creating a conducive climate for sustainable peace and development in Uganda. Since 2005, women have been the core of ARLPI's programme implementation. The Women Empowerment Strategy (WES) was therefore incorporated to empower women to positively contribute to engendering conflict resolution, human rights, sustainable peace and reconciliation processes in Acholi Sub region and compliment the work of the religious leaders. Between 2007-2008, ARLPI successfully implemented the UNSCR 1325 project funded by Norwegian Ministry of Foreign Affairs through CARE Norway in Amuru district.

**Partner 6: Voluntary Initiative Service Organisation (VISO): will be implementing ROCO KWO program in Amuru district**

VISO is a community based organization which started in August 2004 to deliver services to the war affected people in northern Uganda. Its mission is to organize and provide resources to the very poor in order for them to realize their full potential and lead fulfilling lives by engaging in economic development, psychosocial support, peace building, agriculture, water and sanitation, research and advocacy. CARE has worked with VISO in the livelihood and water/sanitation program for the past five years. The organization has been very instrumental in reaching out to displaced and returning communities in Gulu and Amuru.

*I) Contribution to Civil Society*

*Analysis of how the programme assists strengthening of civil society*

This programme supports various civil society organisations (CSOs) that aim to support communities, particularly women in participation in decision making processes, income generating activities, farming and protection against SGBV. By mobilising communities around a common problem and engaging with local leaders, groups, youths, girls and boys, as well as the CSOs themselves, will encourage communities to address their problems/rights at the same time engage with governmental actors to respond to communities needs, particularly in the areas of SGBV, conflict resolution, micro finance and agribusiness enterprises. The CSOs will increase contacts with communities and will create space to represent the communities in different fora at the local, national and international levels. Therefore, institutional support to partner organizations underpins all the work carried in this programme. In addition, mechanism for dialogue and advocacy in this programme will bring together the government, communities and the civil society.

The latter is particularly done through utilising existing linkages with CSOPNU, which is a coalition of about 56 NGOs advocating for sustainable peace and reconciliation, to influence peace building in the northern Uganda. CARE is a member of CSOPNU's steering committee and the coalition has been so influential on issues of rights protection and conflict resolution at the national level for the last four years. The coalition already has a good working relationship with members of parliament hailing from northern Uganda.

*J) Women's right, Equality, and the Environment*

*Description of how women's rights and equality, and the climate and environmental concerns are attended to in the programme*

See Part 1.2.N for a general response to this question.

***K) Sustainability***

***Plans for phasing out the programme and ensuring sustainability***

This is a five-year programme that will be implemented with partners. The programme will be monitored and evaluated periodically. Programme reporting will be on the impact and results indicators set and phase out of the programme will be as follows:

- Discussion on the exit plan will be initiated at the start of programme implementation. Participation of communities, local leaders - and government in the programme implementation will ensure that capacity is built to ensure some level of sustainability when CARE exit.
- The implementation of programme activities will be handed over to partners and the districts at the end of the fifth year of the programme implementation. This means that by then the partners and district will have acquired adequate skills, expertise and resource base to carry the programme on.

***L) Total budget***

The budget below presents the total programme budget:

<b>UGANDA</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Norad	6 536	6 789	6 762	6 762	6 762
CARE Norway (matching funds)	672	698	696	696	696
To be secured	511	4 299	4 090	3 094	2 785
<b>Total programme</b>	<b>7 719</b>	<b>11 786</b>	<b>11 548</b>	<b>10 552</b>	<b>10 243</b>

## IX - THEMATIC PROGRAMMES

### A- Governance and Women's Participation

*Article 7 of CEDAW requires state parties to “take all appropriate measures to eliminate discrimination against women in the political and public life of the country”.*

Over the past years, some progress has been made with regards to women's political participation. More women are now to a greater extent than before taking part in party politics, and are better represented in local and national government. A remaining challenge is however to ensure that increasing women's representation leads to increased gender sensitivity and policies that is more relevant for the situation of ordinary women. Also, experience shows that there is a need to ensure that women's, often informal, knowledge and competence is sufficiently valued, used and built on also in formal and official decision making arenas.

Decentralization reforms are taking place in many developing countries. This is opening up new political space closer to the ground. For CARE, strengthening civil society and national decentralization processes are seen as imperative in order to increase the influence of local people over their own lives, and to ultimately eradicate poverty and ensure sustainable development. Another challenge is therefore to enhance the local governance systems' ability to handle issues related to women's empowerment and gender equality.

Today most of our programmes seek to address these challenges. By using the savings and loan groups as an entry point in our programming our goal is to strengthen women's ability to play a meaningful and relevant role in decision making at various levels; at household level, within the local community and at national and international levels. The logic behind this, is that by increasing women's influence on their own lives, their access to and control over resources, as well as by ensuring an increased say within various decision making arenas, women will gain a better ability to cater for their own lives. Simultaneously, we work with local authorities to build their capacity to both respond to the needs of women and to ensure gender sensitivity in planning and budgeting processes.

Promising results from this work have already been recorded. In Niger for example reports state that an increased number of women declare that their opinions are taken into account, and moreover that more women members of savings and loan groups are being elected into, leadership positions at local levels. In Tanzania women members of savings and loan groups have been able to successfully lobby local authorities for midwives to be stationed in rural health centres.

Focus of this thematic programme will be to:

- Ensure systematic collection of lessons learned and good practices from our programmes
- Carry out and facilitate competence building activities (e.g. studies and workshops) to ensure alignment with international best practices in the field
- Facilitate exchange of experiences between country programmes and partners
- Assuring quality of on-going programmes
- Provide technical advise to programmes and partners
- Initiate and support policy related work focusing on channelling experiences from the field to national and international policy levels for higher impact

## **B- Sexual and Reproductive Health and Rights**

*At the 1994 International Conference on Population and Development (ICPD) in Cairo, 179 countries agreed that population and development are inextricably linked, and advancing gender equality and ensuring women's ability to control their own fertility were acknowledged as cornerstones of population and development policies.*

Women's sexual and reproductive health<sup>63</sup> is critical to development and will be one of CARE Norway's major focus areas the next five years. CARE Norway is fully committed to mobilizing support and scaling up efforts to contributing to make reproductive health for all a reality by 2015.

Reproductive rights<sup>64</sup> embrace certain human rights that are already recognized in national laws, international human rights documents and other relevant UN consensus documents, such as the ICPD. Women, for both physiological and social reasons, are far more vulnerable than men to reproductive health problems. In fact, such problems remain the leading cause of ill health and death among women in childbearing age worldwide. Impoverished women suffer disproportionately from unintended pregnancies, maternal death, and sexual transmitted infections including HIV.

At the 2005 World Summit, world leaders endorsed the critical importance of SRHR by agreeing to integrate access to reproductive health into national strategies to attain the millennium development goals 3, 4, 5 and 6<sup>65</sup>. Nevertheless, the MDG lagging most in attainment is number 5: Maternal mortality.

In our work we focus on the right of every girl and woman to control her own sexuality and to choose if, and when, she wants to have children. We work specifically on preventing women from suffering disability or death caused by pregnancies or deliveries. Particular attention is given to vulnerable girls and women, such as those who are pregnant, adolescent or displaced. Because many women are not in the position to abstain from sex, rely on fidelity or negotiate condom use, we experience that the issue must be approached more holistically. The only viable prevention strategy is to implement a multi-faceted package of interventions that seek to redress deep-rooted gender imbalances.

Through our local partners, usually in close collaboration with relevant governmental institutions, we aim to increase availability and access to reproductive health services (including information family planning, assisted childbirth and prevention of sexually transmitted infections) for all women and girls in reproductive age. Focus on linking reproductive health services to HIV and AIDS prevention, treatment and care is critical in order to expand access to both types of care. Another part of our strategy is to support "health behaviour change initiatives" targeting both women and men. In recognition that men are integral to reproductive health, we will engage men in this issue and expand our support to information and services that can make men healthier and more responsible sexual partners. Efforts to mobilising men will be scaled up considerably during the next 5 years, particularly with funds from the NRK 2009 Telethon.

Over the past years CARE Norway has implemented several projects specifically aiming at improving sexual and reproductive health. In Burma, for example, CARE is implementing activities to increase adolescent's ability to protect themselves from sexually transmitting diseases and unwanted

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<sup>63</sup> A state of complete physical, mental and social well-being in all matters relating to the reproductive system and to its functions and processes.

<sup>64</sup> These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. They also include the right of all to make decisions concerning reproduction free of discrimination, coercion and violence.

<sup>65</sup> Promote gender equality and empower women, reduce child mortality, improve maternal health and combat HIV/AIDS. The concept of reproductive health is multidimensional and its components are woven throughout the MDG framework.

pregnancies in addition to securing access for poor pregnant women to professional birth attendants. This issue is also integrated in most of our programmes as the savings and loan groups are being used as entry points for initiating discussions around sensitive issues such as early marriage/pregnancy, family planning, condoms as prevention against HIV etc. Important objectives are to increase women's knowledge about rights, service availability; prevention methods in addition to enhance their ability negotiate the terms of sexuality with husbands/partners. In the next five years, CARE Norway will give even greater attention to strengthening the ability of groups of women to lobby towards local authorities to prioritise sexual and reproductive rights as we experience important results from this work. An example is from the district of Kigoma in Tanzania where the local government provided a delivery health clinic and professional birth attendants after active lobbying efforts by saving and loan groups.

Focus of this thematic programme will be to:

- Document and scale-up of promising practices
- Carry out and facilitate competence building activities to ensure alignment with international best practices in the field.
- Facilitate exchange of experiences between country programmes and partners
- Provide technical support to programme and partners
- Initiate and support policy related work focusing on channelling experiences from the field to national and international levels for higher impact.
- Contribute to international debates on the protection of women in conflict through national and international advocacy campaigns organised by CARE International's Great Lakes Advocacy Group

## C- Women's Economic Empowerment

*CARE works with Microfinance as a means to fulfil women's rights income and economic development primarily, but also as a means of fulfilling their rights to information, education, organisation and meaningful interaction and participation in society*

Women all over the world bear great responsibility for the upkeep of their families both in their productive and reproductive roles. However they execute their productive role usually within the informal sector and without the appropriate support in terms of financial services that can help them develop and advance economically. Women in many countries do not have ownership rights to land and cannot provide loan guarantees that satisfy the banks.

The Micro finance industry in general seeks to serve clients who normally do not pass the requirements and Micro Credit has been given increased attention over the last decade, and particularly since Yunus and Grameen Bank were awarded the Nobel Peace price.

CARE has worked with micro finance programmes for many years. For the last 10 years however, CARE Norway has concentrated on village savings and loans groups (VS&L) where a combination of training in organisational development and very basic financial literacy provide women with a vehicle for economic and social empowerment. No external loan fund is inserted by CARE. The capital is raised among the members of the groups through small, regular contributions. CARE Niger pioneered the methodology in the Mata Masu Dubara programme, building a traditional form for savings mechanism known as tontine or ROSCAS (rotative savings and credit associations), but developing it into what has later been labelled as ASCAS (accumulating savings and credit associations). The support came from CARE Norway and Norad through CARE Norway's frame agreement, for quite some time before gaining recognition with other donors. However, currently the basic methodology is being applied by CARE in 22 countries worldwide (including all the country programmes included in this proposal, except Burma). The total number of people being reached worldwide is estimated to be 2 160 000 of which 850 000 are in Africa.

CARE's Women's Economic Empowerment programme aims at providing women with a means to improve their economic security and to develop their businesses, and in the longer run to claim their rightful position within the formal economy of their country.

From the VS&L basics there are several avenues. The experience with getting the groups together in networks is varied, and can be seen as different responses to various needs.

- 1) Need for larger pots of capital for bigger investments or increasing scope of activity.
- 2) Response to greater needs for information and training.
- 3) Creating a social movement to be able to change

The Women's Economic Empowerment programme will first and foremost concentrate on the economic development aspect, but will be closely linked to the Governance and Women's Participation programme.

At a general level, the purpose of this thematic programme will be to:

- Ensure systematic collection of lessons learned and good practices from our programmes.
- Carry out and facilitate competence building activities (e.g. studies and workshops) to ensure alignment with international promising practices in the field
- Exchange with centres of expertise within the field of MF, like CGAP, SEEP network, Micro finance Summit and others
- Facilitate exchange of experiences between country programmes and partners
- Assure quality of ongoing programmes

### **CARE – Norad multi-year plan 2009 – 2013**

- Provide technical support to programmes and partners
- Initiate and support policy related work focusing on channelling experiences from the field to national and international levels for higher impact.

Particular focus for research for the coming years for this programme will be to study experiences of VS&L's that have linked with more formal economy instruments, and to look more closely at business development and market linkages.

## D- Gender Based Violence

*The CEDAW Committee has recommended that “the States parties report on legislation, the establishment of women’s refuges, and other measures to protect women against all forms of violence, sexual abuse and harassment in the family, the workplace, etc. with the inclusion of data documenting the extent of all forms of violence against women”.*

CARE will in the next five years put gender-based violence high up on the agenda. Gender-based violence encompasses a wide range of human rights violations including domestic violence, harmful traditional practices, trafficking in women and girls, sexual assault and harassment, sexual abuse of women and girls. It exemplifies and reinforces inequities between women and men and breaches the dignity, security and human rights of its victims. It also prevents women from living full lives and actively taking part in society throughout their life cycle. This way gender based violence reinforces discrimination in education, prevents participation in political, cultural and social arenas and from gaining control over economic resources.

Through our work we support women and girls who are victims of gender based violence to receive adequate support and counselling. Through close collaboration with relevant governmental institutions, as well as local civil society actors, we aim to strengthen local ability and capacity to provide quality medical, psychosocial and legal services for survivors. Another important strategy is to support various community structures to undertake actions to increase general knowledge and awareness of gender based violence as a violation of human rights; and change attitudes and behaviours, which ultimately will reduce the incidence of this type of violence. This includes supporting both general information - and awareness raising campaigns, but also activities targeting specific groups who are at risk of becoming perpetrators (e.g. school teachers; military; police). “Ordinary” men are also being targeted in order to engage them in the struggle against various forms of gender based violence. This will be drastically scaled up during the next 5 years, particularly with funds from the NRK 2009 Telethon.

Another dimension of gender based violence is the increasing extent that rape has been, and still is being, used as a weapon of war. We have seen this in several of our programme countries. The UN Security Council Resolution 1325 recognized women’s vulnerability in armed conflicts, particularly with regards to gender based violence. Studies have however shown that such violence is also very much a challenge in reconciliation and post conflict situations.

CARE Norway has during the past years developed considerable experience on gender based violence. This includes projects related to trafficking of women and mobilizing young men against gender based violence in the Balkans; sexual and gender based violence in Burundi and Northern Uganda; female genital mutilation in Mali, Ethiopia and Somaliland. In addition, the savings and loan groups are being used as entry points for initiating discussions around sensitive issues; including in many cases gender based violence. Some of the results include: In Mali, the percentage of newly cut girls in the age-group 0-5 years has decreased by as much as up to 50% (from 36,8% to 16,3%) in only 12 month. In Rwanda there are strong indications that gender based violence at household and local community level has been reduced after discussions between men and women on the issue within the various saving and loan groups.

Focus of this thematic programme will be to:

- Document and scale-up of promising practices
- Carry out and facilitate competence building activities to ensure alignment with international best practices in the field.
- Facilitate exchange of experiences between country programmes and partners
- Provide technical support to programme and partners

**CARE – Norad multi-year plan 2009 – 2013**

- Initiate and support policy related work focusing on channelling experiences from the field to national and international levels for higher impact.
- Contribute to international debates on the protection of women in conflict through national and international advocacy campaigns organised by CARE International's Great Lakes Advocacy Group

## **E - Gender and Advocacy Programme**

A key process of development is to encourage social and economic change that improves a society's ability to meet the essential needs of their populations. In order to achieve this, technical solutions must be supplemented by political change. Perhaps one of the largest challenges in this regard is to ensure the political voice and participation of women.

CARE has traditionally focused its work on providing emergency relief and development programming. However, many of the causes of poverty lie in the policy realm. In order to make a stronger impact on the underlying causes of poverty, CARE is developing an advocacy programme to influence policy formulation or implementation both in Norway and in program countries. A key component will be to analyse Norwegian development policy and practice, especially from a gender perspective, and to use program information and country specific information from country offices to influence Norwegian development policy and public debate.

The programme will be applied across all the other thematic programmes. A key aspect of the advocacy programme is to take the lead on gender analysis on all programmes.

### **Women's Economic Empowerment**

CARE's work village savings and loans groups (VS&L) has proven to be more than a vehicle for economic and social empowerment: Through increased economic empowerment and strengthening local civil society, an opportunity has been created for women to improve their political voice. In order to grasp this opportunity, local country programmes need to strengthen their advocacy capacity and expertise, and the advocacy programme will assist country offices in developing such strategies.

### **Governance and Women's Participation**

CARE's work in strengthening civil society aims to increase the influence of local people over their own lives, and to eradicate poverty and ensure sustainable development. As mentioned in the thematic programme women and governance (see A above) decentralization reforms in many countries are creating new access points for influencing political development on the ground. The advocacy programme will assist country offices in developing strategies and processes in order to improve their ability to exercise such influence.

### **Sexual and Reproductive Health and Rights**

Reproductive health can only be ensured if relevant human rights are implemented. Many of these are already recognized in national laws, international human rights documents and other relevant UN consensus documents, such as the ICPD – but their implementation varies across and within countries.

### **Gender-based violence**

Gender-based violence encompasses a wide range of human rights violations, and reinforces discrimination in education, prevents participation in political, cultural and social arenas and prevents women from gaining control over economic resources. This is deeply tied with gender imbalance, and CARE aims to implement a package of interventions that seek to redress deep-rooted gender imbalances. The advocacy programme will support this by assisting country offices in assessing national human rights commitments and developing advocacy strategies for improved implementation.

### **Engendering emergencies**

CARE Norway will seek to ensure that by engendering emergencies, the space is made for women to visibly and actively engage in dialogue and peace building mechanisms. To this end, we will favourably consider initiatives that promote the implementation of Resolution 1325 which implicitly gives women access to arenas of decision-making and participation in peace building processes previously denied to them. The advocacy programme will support the emergencies programme

through taking lead in gender analysis, and to press for policy change in national and international emergency response.

**CARE International**

CARE Norway's advocacy programme is complemented in CARE International's new Strategic Direction 2: Global Advocacy, which calls for "CI members and Country Offices (CO) to become more effective in joint advocacy around policy related causes of poverty and humanitarian suffering". The objective of SD2 is to unify the voices and experiences of 70 Country Offices, local partners, CI members and the CI secretariat around selected advocacy issues. CARE Norway has taken a strong role in developing this new direction in CIs work, and the advocacy programme will assist in further strengthening CIs advocacy efforts.

The focus of this program will be to:

- Lead gender analysis on all programme and policy related communications to country offices and to donors.
- Support country offices in the development of political advocacy strategies and advocacy capacity.
- Communicate program information and country specific information from CARE country offices to partners in Norway.
- Influence development and humanitarian policies in Norway, through taking part in parliamentary processes, influencing the civil service and through communications work.
- Communicate CARE Norway's strategy to policy makers in Norway and to CARE International.
- Support implementation of global advocacy efforts in cooperation with other CARE International members.

**Annex 1: Study and Evaluation plan for CARE Norway 2009 – 2013**

The activities included below will be commissioned by CARE Norway, except for the baseline study in 2009 and the end evaluation which is integrated in the programme proposals. There are number of other studies and assessments at the country offices which is not included in this list, but which will impact the ongoing adjustment of the programmes.

CARE International is positioning it self to meet the increased demand for documented programme impact, knowledge and learning. Profound systems for data-collections, analysis, storage, communication and reflection are shared among the CARE International members.

<b>Focus area</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Programme (2009-2013) baseline study	X				
Microfinance and women's economic empowerment impact assessment (two parts)	X	X			
Gender-based violence programme assessment			X		
Governance and women participation study		X			
Sexual and Reproductive Health and Rights programme assessment	X				
End-term programme (2009-2013) evaluation, including focus on CARE Norway's added value				X	

**Annex 2: Common indicators<sup>66</sup>**

<b>Core outcome issue</b>	<b>Indicators</b>
Changes in policies promoting women's rights	Existence and effective enforcement of women's rights laws and policies in the following domains:  <ul style="list-style-type: none"> <li>- <i>Women's economic security (their property rights, inheritance rights; etc)</i></li> <li>- <i>Women's civic and political rights</i></li> <li>- <i>Women's SRHR and maternal health</i></li> <li>- <i>Addressing GBV (prevention as well as procedures for filing GBV cases and policies related to care and support services)</i></li> </ul>
Change in the attitude of men and women regarding women empowerment	Evidence of change in attitudes of men and women regarding women's empowerment as is seen in the following areas:  <ul style="list-style-type: none"> <li>- <i>Women's economic security (property rights, inheritance, involvement in paid work, etc)</i></li> <li>- <i>Women's participation in the public sphere, decision making at community level</i></li> <li>- <i>Women's ability to make decision on their SRHR (use of contraceptives, accessing maternal health care, choosing partner etc)</i></li> <li>- <i>Women's exposure to GBV (domestic violence, harassment, harmful traditions as FGC, early marriage etc)</i></li> </ul>
1.1. Outcomes related to Economic security of women	% of women with control over assets in household
1.2 Outcomes related to women's vulnerability	% of women with capacity to cope with economic shocks
2.1 Decision-making, participation and social relations.	% of women that report meaningful participation in decision-making bodies at community level
	Women's perception of social inclusion in the community
3.1. Changes in structures and governance, social cultural environment regarding sexual and reproductive health and rights (SRHR)	% of women reporting satisfaction with the availability and quality of SRHR related services
3.2 Women and SRHR	% of women making informed choices/decisions with regards to their SRHR
4.1 Prevalence of GBV	% women who report having being subjected to GBV
4.2 Outcomes related to GBV prevention and rehabilitation	A) % identified GBV survivors that who utilize available GBV related services
	B) % of identified GBV survivors who report satisfaction with GBV related services

<sup>66</sup> The indicators will in July be operationalized and subsequently be included in the baselines to be undertaken in the countries in October 2009.